

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Team Ryan

ADDRESS (number and street) **320 1st St SE**

Check if different than previously reported. (ACC) **Washington DC 20003**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C **C00545947**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on **MM / DD / YYYY** in the State of **DC**

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on **11 / 06 / 2018** in the State of **DC**

5. Covering Period **10 / 18 / 2018** through **11 / 26 / 2018**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kilgore, Paul, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Kilgore, Paul, , ,* [Electronically Filed] Date **12 / 05 / 2018**

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Team Ryan

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="976860.41"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2144430.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="866142.00"/>	<input type="text" value="19799506.51"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3010572.52"/>	<input type="text" value="20776366.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1332407.61"/>	<input type="text" value="19098202.01"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1678164.91"/>	<input type="text" value="1678164.91"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Team Ryan

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	629586.99	16077210.78
(ii) Unitemized	174175.39	925619.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	803762.38	17002830.47
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	12500.00	2442750.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	816262.38	19445580.47
12. Transfers From Affiliated/Other Party Committees.....	49399.62	353074.38
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	30.00	401.64
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	450.00	450.02
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	866142.00	19799506.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	866142.00	19799506.51

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	685754.15	5609413.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	685754.15	5609413.27
22. Transfers to Affiliated/Other Party Committees.....	646603.46	13278459.24
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	129379.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	80500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	209879.50
29. Other Disbursements (Including Non-Federal Donations).....	50.00	450.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1332407.61	19098202.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1332407.61	19098202.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	816262.38	19445580.47
34. Total Contribution Refunds (from Line 28(d))	0.00	209879.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	816262.38	19235700.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	685754.15	5609413.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	30.00	401.64
38. Net Operating Expenditures (subtract Line 37 from Line 36)	685724.15	5609011.63

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. AINLEY, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24217 ZELL CT

City CRESTLINE	State CA	Zip Code 92325-
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 11 / 01 / 2018
Transaction ID : SA11A.561939

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

B. AINLEY, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24217 ZELL CT

City CRESTLINE	State CA	Zip Code 92325-
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 11 / 01 / 2018
Transaction ID : SA11A.561940

Amount of Each Receipt this Period
 100.00

Memo Item
 CONTRIBUTION

C. AKARAKIAN, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8310 PERSHING DR.

City PLAYA DEL REY	State CA	Zip Code 90293-7842
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HIGHLAND THEATRES	Occupation (for Individual) THEATER MANAGER
--------------------------------------------------------	------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 10 / 26 / 2018
Transaction ID : SA11A.560620

Amount of Each Receipt this Period
 250.00

Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 604 TORTOISE WAY

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558930

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 604 TORTOISE WAY

City SATELLITE BEACH	State FL	Zip Code 32937-3830
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561618

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. ALLEY, JOHN-EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 905 MARINER WAY

City TAMPA	State FL	Zip Code 33602-5759
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : SA11A.558654

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ALLEY, JOHN-EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 MARINER WAY
 City TAMPA State FL Zip Code 33602-5759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560733
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. ALLEY, JOHN-EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 MARINER WAY
 City TAMPA State FL Zip Code 33602-5759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560755
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ALLEY, JOHN-EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 MARINER WAY
 City TAMPA State FL Zip Code 33602-5759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561603
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 367
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ALPINE, DEAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 40120 PASEO ORO

City RANCHO MIRAGE	State CA	Zip Code 92270-3334
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11A.559071

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. ANDERSON, BOB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15825 QUALITY TRAIL NORTH

City SCANDIA	State MN	Zip Code 55073-9777
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : SA11A.559513

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. ANDERSON, ROLLIE, H., MR. ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3630 PLUM CREEK DR

City SAINT CLOUD	State MN	Zip Code 56301-9540
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ANDERSON TRUCKING SERVICES	Occupation (for Individual) CEO
-----------------------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11A.560064

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	26500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANDREWS JR., PAUL, E., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 JENKINS ROAD
 City ALEDO State TX Zip Code 76008-2408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TTI INC. Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561091
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. ANTHONY, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 249 OLEANDER AVE
 City CORPUS CHRISTI State TX Zip Code 78404-1769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559319
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562768
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2580.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ARGUINZONI, LYNN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ARD RD.
 City SEAGOVILLE State TX Zip Code 75159-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562769
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. ARMSTRONG, NANCY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2005 SOUTHRIDGE TERRACE #2005
 City NORTHFIELD State IL Zip Code 60093-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559815
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. ARTHUR, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 RIVERMEAD RD APT 129
 City PETERBOROUGH State NH Zip Code 03458-1793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563270
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	580.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ASMUTH III, ANTHONY, W., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9612 NORTH JUNIPER CIRCLE

City MEQUON	State WI	Zip Code 53092-6216
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2018

Transaction ID : SA11A.559793

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

Mailing Address 20160 SAINT ANDREWS DRIVE

City OLYMPIA FIELDS	State IL	Zip Code 60461-1169
------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) LAWYER
----------------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2018

Transaction ID : SA11A.561351

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. AVANZINO, TONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2041 PACIFIC AVENUE

City ALAMEDA	State CA	Zip Code 94501-2714
-----------------	-------------	------------------------

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

Name of Employer (for Individual) NEX GEN.	Occupation (for Individual) CARPENTRY
-----------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2018

Transaction ID : SA11A.561706

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BACHER, ARTHUR, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 FOREST COVE DRIVE
 APT 25
 City AKRON State OH Zip Code 44319-3666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST. VICTOR Occupation (for Individual) PASTOR EMERITUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559917
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. BAERLOCHER, H. MARY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 LONGSTAFF STREET
 City MISSOULA State MT Zip Code 59801-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559927
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558716
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.559055
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559166
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559167
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.560152
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.560228
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.560300
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.560495
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018
Transaction ID : SA11A.560787
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.561014
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt **10 / 29 / 2018**
Transaction ID : SA11A.561279
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt **11 / 03 / 2018**
Transaction ID : SA11A.562849
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BAHLER, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5927 S CREEKSIDE CT
 City REMINGTON State IN Zip Code 47977-8867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2435.00

Date of Receipt **11 / 03 / 2018**
Transaction ID : SA11A.562850
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BAHLER, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5927 S CREEKSIDE CT

City REMINGTON	State IN	Zip Code 47977-8867
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2435.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2018

Transaction ID : SA11A.562932

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 4582 COUNTY HIGHWAY 330

City UPPER SANDUSKY	State OH	Zip Code 43351-9771
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		19		2018

Transaction ID : SA11A.563374

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

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

Mailing Address 4582 COUNTY HIGHWAY 330

City UPPER SANDUSKY	State OH	Zip Code 43351-9771
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		19		2018

Transaction ID : SA11A.563375

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARBARITS, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 KENDRA JO DRIVE
 City MINFORD State OH Zip Code 45653-8620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560555
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BARNHART, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 E BERCH STREET
 City ALLIANCE State OH Zip Code 44601-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559117
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BARNHART, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 FRANKLIN AVENUE
 City LANCASTER State OH Zip Code 43130-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560460
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 580.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BARNHART, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 815 FRANKLIN AVENUE
 City LANCASTER State OH Zip Code 43130-2726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563179
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. BARRON, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 TRAFALGAR COURT
 City COLUMBIA State SC Zip Code 29209-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562951
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BARTLETT, KENNETH, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 HEARTHSTONE RIDGE ROAD
 City LANDRUM State SC Zip Code 29356-9602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559918
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 665.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BASKIN M.D., WILLIAM, N., DR., M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **625 NORTH CALVIN PARK BOULEVARD**

City **ROCKFORD** State **IL** Zip Code **61107-4612**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **10 / 31 / 2018**

Transaction ID : SA11A.561355

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

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

Mailing Address **3006 NE BRYCE STREET**

City **PORTLAND** State **OR** Zip Code **97212-1718**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 26 / 2018**

Transaction ID : SA11A.560364

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

C. BEALL, ROBERT, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5300 MIRAMAR LANE**

City **COLLEYVILLE** State **TX** Zip Code **76034-5554**

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

Name of Employer (for Individual) **BEALL INVESTMENTS** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt **11 / 05 / 2018**

Transaction ID : SA11A.563103

Amount of Each Receipt this Period **35.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **735.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEALL, ROBERT, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 MIRAMAR LANE
 City COLLEYVILLE State TX Zip Code 76034-5554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEALL INVESTMENTS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.563105
 Amount of Each Receipt this Period
 500.00
 Memo Item
CONTRIBUTION

B. BEARD, JOHN, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1143 MARION DRIVE
 City CHARLOTTESVILLE State VA Zip Code 22903-4662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.559896
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

C. BEARD, JOHN, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1143 MARION DRIVE
 City CHARLOTTESVILLE State VA Zip Code 22903-4662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2018
Transaction ID : SA11A.563271
 Amount of Each Receipt this Period
 150.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BEATTY, VADA, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 SANDISCOTT DRIVE

City ARNOLD State MO Zip Code 63010-3588

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018

Transaction ID : SA11A.561395

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. BEATTY, VADA, C., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 SANDISCOTT DRIVE

City ARNOLD State MO Zip Code 63010-3588

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2018

Transaction ID : SA11A.563323

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

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

Mailing Address 3900 W LE MONT BLVD

City MEQUON State WI Zip Code 53092-5226

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018

Transaction ID : SA11A.559627

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1060.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BELL, MICHAEL, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2018
Mailing Address 1701 SPYGLASS UNIT 17 UNIT 17		Transaction ID : SA11A.561728
City AUSTIN	State TX	Zip Code 78746-7989
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BELYAVSKI, ALEX, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2018
Mailing Address 2626 EL CAMINO REAL		Transaction ID : SA11A.562117
City REDWOOD CITY	State CA	Zip Code 94061-3815
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) COAST LIGHTING	Occupation (for Individual) BUYER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BENGTON, BRUCE, P., ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2018
Mailing Address 2 GAELSONG LANE		Transaction ID : SA11A.559168
City READING	State PA	Zip Code 19610-3120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 225.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR.
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561457
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR.
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561459
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR.
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.563121
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BENSON, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6416 SW LOOP DR.
 City PORTLAND State OR Zip Code 97221-3385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.563124
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. BENTLEY, MARYANN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 SHERIDAN LANE
 City GARDNERVILLE State NV Zip Code 89460-6547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.560601
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BERENSTAIN, RONALD, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 HILLSIDE DRIVE E
 City SEATTLE State WA Zip Code 98112-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2018
Transaction ID : SA11A.560404
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BERG, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4028 CALLE ISABELLA
 City SAN CLEMENTE State CA Zip Code 92672-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559275
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. BERG, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4028 CALLE ISABELLA
 City SAN CLEMENTE State CA Zip Code 92672-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560265
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. BERRY, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8311 N MAIN ST
 City DAYTON State OH Zip Code 45415-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERRYS LAWN LANDSCAPING LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.560275
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BILLINGSLEY, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 RAMPART PASS
 City WACCABUC State NY Zip Code 10597-1017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN & WAKEFIELD Occupation (for Individual) COMMERCIAL REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562264
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BISCHOFF, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 384 OCEAN AVE N 7D
 City LONG BRANCH State NJ Zip Code 07740-7763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EARTH TREASURES INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559162
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BISHOP, RONALD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16026 LAKESIDE LOOP LANE
 City CORNELIUS State NC Zip Code 28031-0379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562361
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BLACK, FREDDA, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 WEST PINE AVENUE
 City MIDLAND State TX Zip Code 79705-6523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560437
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

B. BLACK, GERALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15068 FM 766
 City GONZALES State TX Zip Code 78629-9113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560361
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. BLANCHARD, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 17583
 City BEVERLY HILLS State CA Zip Code 90209-3583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOUGLAS ELLIMAN Occupation (for Individual) REAL ESTATE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561599
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BLUM, ANDREW, , MR.,		Date of Receipt MM / DD / YYYY 11 / 14 / 2018 Transaction ID : SA11A.563282
Mailing Address 320 E 57TH ST APT B APT 4B		Amount of Each Receipt this Period 250.00
City NEW YORK	State NY	Zip Code 10022-2948
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) C L KING & ASSOC	Occupation (for Individual) MANAGING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BODARY, A, , ,		Date of Receipt MM / DD / YYYY 10 / 27 / 2018 Transaction ID : SA11A.560961
Mailing Address 2070 RISSER RD.		Amount of Each Receipt this Period 500.00
City CANANDAIGUA	State NY	Zip Code 14424-8087
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BOEHNER, DALE, , ,		Date of Receipt MM / DD / YYYY 11 / 05 / 2018 Transaction ID : SA11A.562458
Mailing Address 5255 RONALD REAGAN BLVD 220		Amount of Each Receipt this Period 250.00
City JOHNSTOWN	State CO	Zip Code 80534-6503
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DEVELOPER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOEHNER, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5255 RONALD REAGAN BLVD
 220
 City JOHNSTOWN State CO Zip Code 80534-6503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562994
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BOGART, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5548 CAMINO CERRALVO
 City SANTA BARBARA State CA Zip Code 93111-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH BOGART CONSULTING Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562184
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOGER, ALLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 404 LOMAX COVE
 City AUSTIN State TX Zip Code 78732-2482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559187
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOHANNAN, THOMAS, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6027 STANBROOK DRIVE
 City NORTH CHESTERFIELD State VA Zip Code 23234-4155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558823
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. BOLT, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY
 City SAN DIEGO State CA Zip Code 92116-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558740
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOLT, JACQUELINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY
 City SAN DIEGO State CA Zip Code 92116-2005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562797
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOLT, LELAND, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 515 CANTERBURY

City SAN DIEGO	State CA	Zip Code 92116-
-------------------	-------------	--------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2018

Transaction ID : SA11A.559374

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. BORBA, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14840 ROAD 200

City PORTERVILLE	State CA	Zip Code 93257-9309
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DAIRY FARMER
----------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562388

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. BORBA, FRANK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14840 ROAD 200

City PORTERVILLE	State CA	Zip Code 93257-9309
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DAIRY FARMER
----------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562389

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	335.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BORBA, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14840 ROAD 200
 City PORTERVILLE State CA Zip Code 93257-9309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DAIRY FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562390
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BORBA, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14840 ROAD 200
 City PORTERVILLE State CA Zip Code 93257-9309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DAIRY FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562428
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. BORBA, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14840 ROAD 200
 City PORTERVILLE State CA Zip Code 93257-9309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DAIRY FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562429
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 14840 ROAD 200

City PORTERVILLE	State CA	Zip Code 93257-9309
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DAIRY FARMER
----------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11A.562450

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 14840 ROAD 200

City PORTERVILLE	State CA	Zip Code 93257-9309
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DAIRY FARMER
----------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11A.562451

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. BOWLER, BARBARA, J., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3532 LIME TREE COURT

City WALNUT CREEK	State CA	Zip Code 94598-2724
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2018

Transaction ID : SA11A.560424

Amount of Each Receipt this Period
75.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BOWLER, BARBARA, J., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3532 LIME TREE COURT
 City WALNUT CREEK State CA Zip Code 94598-2724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563134
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. BOWLES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 WASHINGTON ST
 City MASSENA State NY Zip Code 13662-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562670
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BOWMAN, CAROLYN, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2154 LILLIAN LANE
 City LISLE State IL Zip Code 60532-1100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558574
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BOWMAN, CAROLYN, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2154 LILLIAN LANE
City LISLE State IL Zip Code 60532-1100
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **11 / 05 / 2018**
Transaction ID : SA11A.562347
Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

B. BOYD, ELIZABETH, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1909 BIRCHFIELD COURT
City KINGSPORT State TN Zip Code 37660-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 31 / 2018**
Transaction ID : SA11A.561382
Amount of Each Receipt this Period **50.00**
 Memo Item
CONTRIBUTION

C. BRADLEY, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 204 LARKIN LANE
City WALLINGFORD State PA Zip Code 19086-6345
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **11 / 01 / 2018**
Transaction ID : SA11A.561788
Amount of Each Receipt this Period **100.00**
 Memo Item
CONTRIBUTION

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRADLEY, EDWARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 LARKIN LANE

City WALLINGFORD State PA Zip Code 19086-6345

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561789

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

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

Mailing Address 2120 RIDGMAR BOULEVARD STE 12

City FORT WORTH State TX Zip Code 76116-2200

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

Name of Employer (for Individual) SELF Occupation (for Individual) RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561393

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. BRAMSON, EDWARD, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 PARK AVENUE, APT 15D APT 28B

City NEW YORK State NY Zip Code 10022-1629

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

Name of Employer (for Individual) SHERBORNE INVESTORS Occupation (for Individual) INVESTMENT MANAGER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561088

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRECUNIER, DOROTHY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3480 STREAMSIDE LANE
 APT 210
 City THOUSAND OAKS State CA Zip Code 91360-8478
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560432
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. BRECUNIER, JOHN, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8900 SOUTHWEST SWECK DRIVE
 APT 1415
 City TUALATIN State OR Zip Code 97062-7536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559789
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BREWER, GIRARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39905 VIA SCENA
 UNIT 135
 City PALM DESERT State CA Zip Code 92260-1823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562585
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRIGHAM, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1156 S KINGS DR.
City CHARLOTTE State NC Zip Code 28207-1806
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558765
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. BRIGHAM, JOAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1156 S KINGS DR.
City CHARLOTTE State NC Zip Code 28207-1806
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561192
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BROADHURST, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 182 COUNTRY CLUB ROAD
City LIGONIER State PA Zip Code 15658-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560032
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRODD, MARILYN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5012 HERMITAGE DR.
 City RALEIGH State NC Zip Code 27612-2714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561610
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

B. BROER, PETER, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12611 LAKE SHORE BOULEVARD
 City CLEVELAND State OH Zip Code 44108-1136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LUMITEX Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558576
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BROOKS, CONNIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20124 E. AMERICAN AVE.
 City REEDLEY State CA Zip Code 93654-9621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562581
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BROOKS, KELLY, , ,

Mailing Address **20124 E. AMERICAN AVE.**

City REEDLEY	State CA	Zip Code 93654-9621
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) BROOKS HEALTH CARE	Occupation (for Individual) CEO
----------------------------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 04 / 2018

Transaction ID : SA11A.562821

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BROWNRIDGE, CHARLES, , DR.,

Mailing Address **3089 LAUREL DRIVE**

City SACRAMENTO	State CA	Zip Code 95864-4953
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) SUTTER MEDICAL GROUP	Occupation (for Individual) PHYSICIAN
------------------------------------------------------------------	-------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
11 / 03 / 2018

Transaction ID : SA11A.562930

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BROWN, LOWELL, , ,

Mailing Address **800 GARCIA ST**

City SANTA FE	State NM	Zip Code 87505-2862
-------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 20 / 2018

Transaction ID : SA11A.559347

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BRYAN, FREDERICK, E., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8980 INDIAN RIDGE LN
 City CINCINNATI State OH Zip Code 45243-3718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559302
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BUFFINGTON, GREGORY, , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1787B GLENWOOD CIRCLE
 City SUGAR GROVE State IL Zip Code 60554-2017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562939
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. BURCH, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1514 GLENBEIGH CT
 City SAINT PAUL State MN Zip Code 55125-3316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559317
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURG, PAUL, , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 VIA ALMAR
 City PALOS VERDES ESTAT State CA Zip Code 90274-1227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560061
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. BURKHOLDER, PHYLLIS, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2050 W DUNLAP AVENUE LOT R250
 City PHOENIX State AZ Zip Code 85021-2934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560398
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. BURKHOLDER, PHYLLIS, J., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2050 W DUNLAP AVENUE LOT R250
 City PHOENIX State AZ Zip Code 85021-2934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563158
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BURMEISTER, PAUL, F., MR.,		Date of Receipt MM / DD / YYYY 10 / 29 / 2018 Transaction ID : SA11A.560465
Mailing Address 1332 NE 180 ROAD CLAFLIN		Amount of Each Receipt this Period 1000.00
City CLAFLIN	State KS	Zip Code 67525-9219
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2860.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BURMEISTER, PAUL, F., MR.,		Date of Receipt MM / DD / YYYY 11 / 06 / 2018 Transaction ID : SA11A.563145
Mailing Address 1332 NE 180 ROAD CLAFLIN		Amount of Each Receipt this Period 1000.00
City CLAFLIN	State KS	Zip Code 67525-9219
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2860.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BURMEISTER, PAUL, F., MR.,		Date of Receipt MM / DD / YYYY 11 / 06 / 2018 Transaction ID : SA11A.563177
Mailing Address 1332 NE 180 ROAD CLAFLIN		Amount of Each Receipt this Period 250.00
City CLAFLIN	State KS	Zip Code 67525-9219
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2860.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BURR, DAVID, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 FAIRWAY WINDS PLACE

City HILTON HEAD ISLAND	State SC	Zip Code 29928-5547
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED	Occupation (for Individual) EXECUTIVE - TRUCKING CO.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
10 / 25 / 2018
Transaction ID : SA11A.559926

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. BURT, CHARLES, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8S041 CREEK DR.

City NAPERVILLE	State IL	Zip Code 60540-9326
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Date of Receipt
11 / 05 / 2018
Transaction ID : SA11A.563123

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. BUSH, JOSEPH, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5402 E CALLE DEL NORTE

City PHOENIX	State AZ	Zip Code 85018-4532
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PHOENIX VA HOSPITAL	Occupation (for Individual) PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
10 / 18 / 2018
Transaction ID : SA11A.558577

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. BUTLER, AUDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 WINDWARD RD
 City FORT WORTH State TX Zip Code 76132-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562676
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. BUTLER, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 S US HIGHWAY 1 401
 City JUPITER State FL Zip Code 33477-5929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562804
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. BYRNE, JOHN, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 LIBERTY BELL COURT
 City BELLE MEAD State NJ Zip Code 08502-5426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559944
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CAIN, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1321 SOLANA RD.
K1

City NAPLES	State FL	Zip Code 34103-3388
----------------	-------------	------------------------

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

Name of Employer (for Individual) ORCHARD	Occupation (for Individual) RECEIVING
----------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11A.559219

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. CAIN, PATRICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1321 SOLANA RD.
K1

City NAPLES	State FL	Zip Code 34103-3388
----------------	-------------	------------------------

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

Name of Employer (for Individual) ORCHARD	Occupation (for Individual) RECEIVING
----------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11A.560636

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

C. CAMILLETTI, SHERRY, L., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 VICTORY STREET

City ESSEX	State IA	Zip Code 51638-3018
---------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562353

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CANNON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 FOULKEWAYS
 City Gwynedd State PA Zip Code 19436-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560029
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. CARNES, CHARLOTTE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 ROCKLAND AVENUE
 City CLARENCE State NY Zip Code 14031-2022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562020
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. CARR, BRIAN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 5TH AVE 20TH FLOOR
 City NEW YORK State NY Zip Code 10019-5463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGH BROOK INVESTORS Occupation (for Individual) PRIVATE EQUITY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.561683
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARTER, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3881 QUARRY MOUNTAIN ROAD

City PARK CITY	State UT	Zip Code 84098-6617
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561546

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. CARTER, CHRISTOPHER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3881 QUARRY MOUNTAIN ROAD

City PARK CITY	State UT	Zip Code 84098-6617
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561547

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. CARY, KATHARINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 276 NORTHLAKE DRIVE

City COLDWATER	State MI	Zip Code 49036-8661
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11A.561045

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CARY, KATHARINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 276 NORTHLAKE DRIVE

City COLDWATER	State MI	Zip Code 49036-8661
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11A.561258

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. CARY, KATHARINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 276 NORTHLAKE DRIVE

City COLDWATER	State MI	Zip Code 49036-8661
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2018

Transaction ID : SA11A.562884

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

C. CASTEEL, ANNIE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2720 DOSTER ROAD

City MADISON	State GA	Zip Code 30650-3527
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.559934

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CASTLE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1600 GLENARM
APT 3103

City DENVER State CO Zip Code 80202-4343

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

Name of Employer (for Individual) PAN AMERICAN LEGAL SERVICES LLC Occupation (for Individual) ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562785

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

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

Mailing Address 982 CELIA LANE

City LEXINGTON State KY Zip Code 40504-2255

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562329

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. CHAMBERS, DOROTHY, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 168 CHAMBERS LANE

City WHEELING State WV Zip Code 26003-8983

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561372

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHAO, ALBERT, Y., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3970 INVERNESS DRIVE
 City HOUSTON State TX Zip Code 77019-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTLAKE CHEMICAL CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 92700.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560808
 Amount of Each Receipt this Period 45000.00
 Memo Item CONTRIBUTION

B. CHAO, ALBERT, Y., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3970 INVERNESS DRIVE
 City HOUSTON State TX Zip Code 77019-1004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WESTLAKE CHEMICAL CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 92700.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.562010
 Amount of Each Receipt this Period 45000.00
 Memo Item CONTRIBUTION

C. CHRISTOPHER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1685 ROYAL PALM WAY
 City BOCA RATON State FL Zip Code 33432-7439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561583
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	91000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CHURCH, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CASTLEBRIDGE LN

City HILTON HEAD ISLAND	State SC	Zip Code 29928-3363
----------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2018

Transaction ID : SA11A.559299

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

B. CHURCH, SHARON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 CASTLEBRIDGE LN

City HILTON HEAD ISLAND	State SC	Zip Code 29928-3363
----------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2018

Transaction ID : SA11A.559300

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

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

Mailing Address 2323 PARANA DR.

City HOUSTON	State TX	Zip Code 77080-5226
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2018

Transaction ID : SA11A.563212

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COBURN, RONALD, O., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1552 JESSE LANE

City GOLDEN	State CO	Zip Code 80403-8068
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561445

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

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

Mailing Address 2850 TARA HILLS DRIVE

City SAN PABLO	State CA	Zip Code 94806-1457
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ADACHI FLORIST	Occupation (for Individual) FLOWER DESIGNER
-----------------------------------------------------	------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2018

Transaction ID : SA11A.563141

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

C. COLLINS, PHYLLIS, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3240 LAKE POINTE BLVD.
339

City SARASOTA	State FL	Zip Code 34231-6900
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558916

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. COLLINS, PHYLLIS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3240 LAKE POINTE BLVD.
 339
 City SARASOTA State FL Zip Code 34231-6900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562729
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. CONKLIN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 CAROLE WAY
 City REDWOOD CITY State CA Zip Code 94061-2776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2018
Transaction ID : SA11A.561225
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. CONKLIN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1590 CAROLE WAY
 City REDWOOD CITY State CA Zip Code 94061-2776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562714
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CONNARD, W. STEWART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 LAMBIANCE CIRCLE
 205
 City NAPLES State FL Zip Code 34108-0770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE INVESTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560698
 Amount of Each Receipt this Period - 125.00
 Memo Item
 CONTRIBUTION
 CHARGED BACK

B. CONNOR, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX305
 City LAONA State WI Zip Code 54541-0305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LUMBERMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559717
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

C. CONNOR, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX305
 City LAONA State WI Zip Code 54541-0305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) LUMBERMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562525
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ - 25.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COOPER JR., J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 743 LOCHMOOR BLVD
 City GROSSE POINTE WOOD State MI Zip Code 48236-4008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREAT LAKES WINE & SPIRITS Occupation (for Individual) BOARD MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561166
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. COOPER, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3700 BRUNSWICK AVENUE
 City LOS ANGELES State CA Zip Code 90039-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560429
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. CORNISH, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 13888
 City PALM DESERT State CA Zip Code 92255-3888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559158
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 785.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CORNISH, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 13888
 City PALM DESERT State CA Zip Code 92255-3888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SMALL BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562556
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT
 City HAMILTON State OH Zip Code 45013-5818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.560574
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. COTTRELL, ROBERT, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 WHEELRIGHT CRESCENT
 City HAMILTON State OH Zip Code 45013-5818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561587
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 7 WHEELRIGHT CRESCENT

City HAMILTON	State OH	Zip Code 45013-5818
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11A.561784

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 7 WHEELRIGHT CRESCENT

City HAMILTON	State OH	Zip Code 45013-5818
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11A.561791

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. COUGHLAN, GARY, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29101 BRENDISI WAY 102

City NAPLES	State FL	Zip Code 34110-2720
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2018

Transaction ID : SA11A.560180

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. COWEN, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 ESSEX DRIVE
 City TENAFLY State NJ Zip Code 07670-2300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COWEN & JACOBS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561591
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. COWHERD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10799 OAKMONT ST.
 City OVERLAND PARK State KS Zip Code 66210-1151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560510
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. CRAIG, CLAUDEANE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1406 SOUTH 50TH DRIVE
 City KANSAS CITY State KS Zip Code 66106-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2018
Transaction ID : SA11A.563213
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1035.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CRAIG, CLAUDEANE, L.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1406 SOUTH 50TH DRIVE
 City KANSAS CITY State KS Zip Code 66106-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2018
Transaction ID : SA11A.563218
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. CRAMER, EUGENE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BREWSTER WAY
 City REDLANDS State CA Zip Code 92373-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558845
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. CRAMER, EUGENE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BREWSTER WAY
 City REDLANDS State CA Zip Code 92373-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559544
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CRAMER, EUGENE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BREWSTER WAY
 City REDLANDS State CA Zip Code 92373-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.560087
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. CRAMER, EUGENE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BREWSTER WAY
 City REDLANDS State CA Zip Code 92373-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.560560
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. CRAMER, EUGENE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BREWSTER WAY
 City REDLANDS State CA Zip Code 92373-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018
Transaction ID : SA11A.560732
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CRAMER, EUGENE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BREWSTER WAY
 City REDLANDS State CA Zip Code 92373-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560942
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. CRAMER, EUGENE, N., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BREWSTER WAY
 City REDLANDS State CA Zip Code 92373-6102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561568
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. CRANE, MARY, K., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 715 SHORT STREET
 City FORT ATKINSON State WI Zip Code 53538-1142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559847
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 107 NAYATT RD

City BARRINGTON	State RI	Zip Code 02806-3300
--------------------	-------------	------------------------

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

Name of Employer (for Individual) PROVIDENCE EQUITY PARTNERS INC	Occupation (for Individual) SENIOR MANAGING DIRECTOR
---------------------------------------------------------------------	---------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.561680

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

B. CREAMER, MARY, JANE, MRS. ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 NAYATT RD

City BARRINGTON	State RI	Zip Code 02806-3300
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.561686

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

C. CULLUM, JANE, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 90

City TAFTON	State PA	Zip Code 18464-0090
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561636

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50030.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. CULLUM, JANE, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 90

City TAFTON	State PA	Zip Code 18464-0090
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.563001

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. CURRIE, RODGER, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2308 N COLUMBUS ST

City ARLINGTON	State VA	Zip Code 22207-2525
-------------------	-------------	------------------------

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

Name of Employer (for Individual) PHRMA	Occupation (for Individual) EXECUTIVE VP
--------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2018

Transaction ID : SA11A.559124

Amount of Each Receipt this Period
6250.00

Memo Item
CONTRIBUTION

C. DALEO, CARLO, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18735 OLD COACH WAY

City POWAY	State CA	Zip Code 92064-6648
---------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : SA11A.560997

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6780.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DAUWALDER, CHRISTIAN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7713 BURTHE STREET
 City NEW ORLEANS State LA Zip Code 70118-3944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018
Transaction ID : SA11A.560456
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

B. DAUWALDER, CHRISTIAN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7713 BURTHE STREET
 City NEW ORLEANS State LA Zip Code 70118-3944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562350
 Amount of Each Receipt this Period
 100.00
 Memo Item CONTRIBUTION

C. DAVIDSON, GORDON, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7955 NORTH PHEASANT LANE
 City MILWAUKEE State WI Zip Code 53217-3019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.562018
 Amount of Each Receipt this Period
 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DAVIS, GEOFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2094 HIDDEN LANE
 City LEONARD State MI Zip Code 48367-3235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHOICES INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561609
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DAVIS, WAYNE, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9939 GOODWOOD BLVD
 City BATON ROUGE State LA Zip Code 70815-4518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559770
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DE LA LUZ, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7915 CALPELLA AVE
 City HESPERIA State CA Zip Code 92345-7513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WYNHAUSENOG WATER CONDITIONING Occupation (for Individual) SALESMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562548
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DEADY, WIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 MILLER RANCH COURT
 City SAN RAFAEL State CA Zip Code 94903-1448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561141
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DEBODE, DONALD, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2051 WEST BEACH RD
 City OAK HARBOR State WA Zip Code 98277-8872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INNKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561477
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. DECKERHOFF, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 SUMMER COURT
 City SPRING State TX Zip Code 77381-6229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TECH M Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559258
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DECKERHOFF, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 SUMMER COURT

City SPRING	State TX	Zip Code 77381-6229
----------------	-------------	------------------------

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

Name of Employer (for Individual) TECH M	Occupation (for Individual) AVP
---------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2018

Transaction ID : SA11A.559259

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. DECKERHOFF, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 SUMMER COURT

City SPRING	State TX	Zip Code 77381-6229
----------------	-------------	------------------------

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

Name of Employer (for Individual) TECH M	Occupation (for Individual) AVP
---------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2018

Transaction ID : SA11A.562829

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

Mailing Address 33 SUMMER COURT

City SPRING	State TX	Zip Code 77381-6229
----------------	-------------	------------------------

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

Name of Employer (for Individual) TECH M	Occupation (for Individual) AVP
---------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2018

Transaction ID : SA11A.562830

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DELORENZO, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7120 MEADOW RUN LANE
 City CHARLOTTE State NC Zip Code 28277-0420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 01 / 2018**
Transaction ID : SA11A.561711
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. DELUCA, RUSSELL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 TRADEA TARN
 City ROSWELL State GA Zip Code 30076-4448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 25 / 2018**
Transaction ID : SA11A.559933
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. DEMARAIS, RIMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 170 IMPERIAL AVENUE
 City WESTPORT State CT Zip Code 06880-4911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt **10 / 27 / 2018**
Transaction ID : SA11A.560970
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEMARAIS, RIMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 IMPERIAL AVENUE

City WESTPORT	State CT	Zip Code 06880-4911
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 05 / 2018
Transaction ID : SA11A.562684

Amount of Each Receipt this Period
125.00

Memo Item CONTRIBUTION

B. DENNIS, BARBARA, F., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3535 STINE ROAD
SPC 178

City BAKERSFIELD	State CA	Zip Code 93309-6665
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 06 / 2018
Transaction ID : SA11A.563165

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. DENTON, AUDREY, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2660 S OCEAN BLVD UNIT 1035

City PALM BEACH	State FL	Zip Code 33480-5487
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
10 / 18 / 2018
Transaction ID : SA11A.558570

Amount of Each Receipt this Period
12500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12660.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DENTON, PETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2660 S OCEAN BLVD UNIT 1035

City PALM BEACH	State FL	Zip Code 33480-5487
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11A.558569

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

B. DESSECKER, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 UPLAND TRACE

City MARIETTA	State GA	Zip Code 30066-3074
------------------	-------------	------------------------

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

Name of Employer (for Individual) SIGMA THERMAL INC	Occupation (for Individual) SALES & ENGINEER
--------------------------------------------------------	-------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2018

Transaction ID : SA11A.561230

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. DEVENS, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 JUNIPER ROAD

City DARIEN	State CT	Zip Code 06820-5707
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11A.559011

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 OF 367
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEVISMES, LUCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 EAST 86 STREET
10A

City NEW YORK State NY Zip Code 10028-1059

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 18 / 2018
Transaction ID : SA11A.559015

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. DIEBOLT, JOANN, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 219 SAINT LAWRENCE BOULEVARD

City NORTHVILLE State MI Zip Code 48168-1557

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 27 / 2018
Transaction ID : SA11A.560418

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. DIMON JR., G., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10240 HENDLEY RD
224

City MANASSAS State VA Zip Code 20110-3400

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 18 / 2018
Transaction ID : SA11A.558771

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DIMON JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10240 HENDLEY RD
 224
 City MANASSAS State VA Zip Code 20110-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018
Transaction ID : SA11A.559194
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. DIMON JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10240 HENDLEY RD
 224
 City MANASSAS State VA Zip Code 20110-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018
Transaction ID : SA11A.560768
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. DIMON JR., G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10240 HENDLEY RD
 224
 City MANASSAS State VA Zip Code 20110-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562677
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DOUGLAS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1440 N LAKE SHORE DRIVE
 20E
 City CHICAGO State IL Zip Code 60610-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562903
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. DOWNING, HOWARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 785 SOUTH VAN ROAD
 City HOLLY State MI Zip Code 48442-8717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.560625
 Amount of Each Receipt this Period
 2400.00
 Memo Item
 CONTRIBUTION

C. DOWNS, PATSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2928 CALLE HERALDO
 City SAN CLEMENTE State CA Zip Code 92673-3543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.559706
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DRINKWATER, GENEVA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 495

City COTTONWOOD	State CA	Zip Code 96022-0495
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1335.00

Date of Receipt
10 / 19 / 2018
Transaction ID : SA11A.558834

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. DUDLEY, ROBERT, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2238 CONCORD STREET

City MOSCOW	State ID	Zip Code 83843-9529
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 25 / 2018
Transaction ID : SA11A.559994

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. DUNLAP, H, RENWICK, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 989 SHOOTING BOX RD

City KING WILLIAM	State VA	Zip Code 23086-2003
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt
10 / 25 / 2018
Transaction ID : SA11A.559895

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 989 SHOOTING BOX RD

City KING WILLIAM	State VA	Zip Code 23086-2003
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11A.563272

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 9052 E VASSAR AVE

City DENVER	State CO	Zip Code 80231-7634
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2018

Transaction ID : SA11A.560805

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 9052 E VASSAR AVE

City DENVER	State CO	Zip Code 80231-7634
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2018

Transaction ID : SA11A.560806

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DUNN, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9052 E VASSAR AVE
 City DENVER State CO Zip Code 80231-7634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560807
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. EARLEY, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 MEETINGHOUSE RD
 City AMBLER State PA Zip Code 19002-3738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FXI INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560639
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EASTHAM, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1840 N PROSPECT AVENUE, APT 812 APT 812
 City MILWAUKEE State WI Zip Code 53202-1997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 13 / 2018
Transaction ID : SA11A.563318
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EASTON, RANDALL, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 FIRST STREET SE STE 420
 STE 420
 City CEDAR RAPIDS State IA Zip Code 52401-2032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US WATER COMPANY Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562587
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. EATON, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 SANTA MARIA COURT
 City ODESSA State TX Zip Code 79765-8515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASTER CORPORATION Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559191
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. EAVES, REUBEN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 MEMORIAL DRIVE
 APT 804
 City CAMBRIDGE State MA Zip Code 02138-5755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTS ADVISORS Occupation (for Individual) FINANCIAL MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559832
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. EGBERTS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 142432
 City GAINESVILLE State FL Zip Code 32614-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560908
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. EICHENBERGER, RUDOLPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 LACARI
 City MAGNOLIA State AR Zip Code 71753-2114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 563.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563152
 Amount of Each Receipt this Period 113.00
 Memo Item CONTRIBUTION

C. EICHENBAUM, SUMIE, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5060 GOVERNORS WALK DR.
 City CANTON State GA Zip Code 30115-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.562233
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	463.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 82 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EISENBERG, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 308 N MCCADDEN PLACE
City LOS ANGELES State CA Zip Code 90004-1024
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559721
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ELLIS, JOSEPH, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3205 N MARIETTA AVENUE, APT B
City MILWAUKEE State WI Zip Code 53211-3133
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559825
Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. ELLIS, JOSEPH, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3205 N MARIETTA AVENUE, APT B
City MILWAUKEE State WI Zip Code 53211-3133
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 5300.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561693
Amount of Each Receipt this Period 800.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1650.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. EMDE, RICHARD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 COMBAHEE ROAD
 City HILTON HEAD ISLAND State SC Zip Code 29928-6127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561335
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. EMILSON, CARL, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 128
 City NORTH MARSHFIELD State MA Zip Code 02059-0128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2018
Transaction ID : SA11A.563161
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. EMMA, R., J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5913 E DECATUR ST
 City MESA State AZ Zip Code 85205-6619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2018
Transaction ID : SA11A.563258
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ENGELDORF, ROSEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8888 CEDARSPUR DR.
 City HOUSTON State TX Zip Code 77055-6665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.18

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560854
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ENGELDORF, ROSEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8888 CEDARSPUR DR.
 City HOUSTON State TX Zip Code 77055-6665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 574.18

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561490
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. ENGLER, KURT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1520 MINTHAVEN RD.
 City LAKE FOREST State IL Zip Code 60045-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W.L. ENGLER DIST. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561764
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. ENGLISH, PHILIP, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7350 BRIGHTSIDE ROAD
 City BALTIMORE State MD Zip Code 21212-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROVERSTONE CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562037
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. ETEMADI, ALIREZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2258 FRONT RANGE CT.
 City ERIE State CO Zip Code 80516-3657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558612
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. EVANS, CATHERINE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 S CHELSEA STREET
 City SISTERSVILLE State WV Zip Code 26175-1129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561109
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1400.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. EVERS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5976 VIZZI COURT
 City LAS VEGAS State NV Zip Code 89131-2858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558945
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FAIRBANKS, RICHARD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 OLD ORCHARD RD.
 City BALTIMORE State MD Zip Code 21229-2440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559417
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. FAIRBANKS, RICHARD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 OLD ORCHARD RD.
 City BALTIMORE State MD Zip Code 21229-2440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560225
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. FAIRBANKS, RICHARD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 OLD ORCHARD RD.
 City BALTIMORE State MD Zip Code 21229-2440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562940
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FALSTAD, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7500 YORK AV. S. 319
 City MINNEAPOLIS State MN Zip Code 55435-5633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561115
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. FALSTAD, CAROLINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7500 YORK AV. S. 319
 City MINNEAPOLIS State MN Zip Code 55435-5633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562818
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FARRAR, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 ROBERT S DRIVE
 City MENLO PARK State CA Zip Code 94025-5543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560753
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FARRELL, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7705 BRIGHAM DRIVE
 City ATLANTA State GA Zip Code 30350-5621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562694
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FAWCETT, GEORGE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 487 BEAULIEU AVENUE
 City SAVANNAH State GA Zip Code 31406-8815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 13 / 2018
Transaction ID : SA11A.563320
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 48278 SW KINGWOOD AVENUE

City MILL CITY	State OR	Zip Code 97360-9501
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.562030

Amount of Each Receipt this Period
75.00

Memo Item CONTRIBUTION

B. FERRIS, C. S., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10300 BIG CANOE

City BIG CANOE	State GA	Zip Code 30143-5121
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11A.561337

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

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

Mailing Address 11 GABLES DRIVE

City YARMOUTH	State ME	Zip Code 04096-7154
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : SA11A.560479

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.561024
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561928
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FIELDMAN, JB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 TURF LANE
 City ROSLYN HEIGHTS State NY Zip Code 11577-2738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561929
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FINTA, BOHUSLAV, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4511 HOMESTEAD ST

City LITTLETON	State CO	Zip Code 80123-1524
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.560293

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. FINTA, BOHUSLAV, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4511 HOMESTEAD ST

City LITTLETON	State CO	Zip Code 80123-1524
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.560294

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. FINTA, BOHUSLAV, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4511 HOMESTEAD ST

City LITTLETON	State CO	Zip Code 80123-1524
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11A.560725

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FISHER, JEROME, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 BAYSIDE DRIVE
 City MADISON State WI Zip Code 53704-5901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018
Transaction ID : SA11A.561692
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 CONTRIBUTION

B. FITZGERALD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 RYECROFT
 City PLYMOUTH State MA Zip Code 02360-2549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.560615
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. FITZGERALD, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 RYECROFT
 City PLYMOUTH State MA Zip Code 02360-2549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018
Transaction ID : SA11A.560718
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FLOOD, CARL, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 11695 OKEEFE CREEK BOULEVARD

City MISSOULA	State MT	Zip Code 59808-8596
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
10 / 27 / 2018
Transaction ID : SA11A.560412

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. FORTSON, ROBERT, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2853 KINGSLAND COURT SOUTHEAST

City ATLANTA	State GA	Zip Code 30339-4252
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 25 / 2018
Transaction ID : SA11A.559886

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

C. FOUGHT, E., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3305 CHRISTIE BOULEVARD

City TOLEDO	State OH	Zip Code 43606-2862
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 800.00

Date of Receipt
11 / 08 / 2018
Transaction ID : SA11A.563269

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. FOX, MARY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 BURR RIDGE CLUB DRIVE
 City BURR RIDGE State IL Zip Code 60527-5254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562271
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. FOXWORTH, ROSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9287 EASTWENLOCK DRIVE
 City MECHANICSVILLE State VA Zip Code 23116-4157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2018
Transaction ID : SA11A.561241
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. FRATER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 PRESKOY AVE
 City BRONXVILLE State NY Zip Code 10708-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2018
Transaction ID : SA11A.560938
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRAZIER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1405 VIA CASTILLA
City PALOS VERDES ESTAT State CA Zip Code 90274-2850
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) USC Occupation (for Individual) PROFESSOR
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 22 / 2018**
Transaction ID : SA11A.559235
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FRENCH, ELISABETH, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2122 MASSACHUSETTS AVENUE NW, APT 312
City WASHINGTON State DC Zip Code 20008-2827
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 06 / 2018**
Transaction ID : SA11A.563170
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. FRIDRICH, HEINZ, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 131 LONG POINT DRIE
City FERNANDINA BEACH State FL Zip Code 32034-6410
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 430.00

Date of Receipt **10 / 25 / 2018**
Transaction ID : SA11A.559948
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 96 OF 367
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **HC74 BOX69**

City PECOS	State NM	Zip Code 87552-9603
----------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 31 / 2018

Transaction ID : SA11A.561472

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address **HC74 BOX69**

City PECOS	State NM	Zip Code 87552-9603
----------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
10 / 31 / 2018

Transaction ID : SA11A.561473

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FRIEDMAN, J. ROGER, , ,

Mailing Address **HC74 BOX69**

City PECOS	State NM	Zip Code 87552-9603
----------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
11 / 02 / 2018

Transaction ID : SA11A.562984

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. FRIEDMAN, J. ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC74 BOX69
 City PECOS State NM Zip Code 87552-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 02 / 2018
Transaction ID : SA11A.562985
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. FRIEDMAN, J. ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC74 BOX69
 City PECOS State NM Zip Code 87552-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.563072
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. FRIEDMAN, J. ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC74 BOX69
 City PECOS State NM Zip Code 87552-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.563073
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FRIEDMAN, J. ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC74 BOX69
 City PECOS State NM Zip Code 87552-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.563074
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. FRIEDMAN, J. ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC74 BOX69
 City PECOS State NM Zip Code 87552-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.563075
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. FRIEDMAN, J. ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address HC74 BOX69
 City PECOS State NM Zip Code 87552-9603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.563076
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. FROWISS, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 909
 City RANCHO SANTA FE State CA Zip Code 92067-0909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558606
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FUENTES, JOSE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 9TH ST NW STE 750
 City WASHINGTON State DC Zip Code 20001-4589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTPORT STRATEGIES LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562017
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. FULGHUM, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5515 MILL STONE DRIVE
 City OOLTEWAH State TN Zip Code 37363-6859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RSS INSURANCE Occupation (for Individual) INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561893
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLIHER, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 191 N TIMBER RIDGE CT

City MUNCIE	State IN	Zip Code 47304-5771
----------------	-------------	------------------------

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

Name of Employer (for Individual) A E BOYCE CO INC	Occupation (for Individual) EXECUTIVE
-------------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : SA11A.559518

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 191 N TIMBER RIDGE CT

City MUNCIE	State IN	Zip Code 47304-5771
----------------	-------------	------------------------

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

Name of Employer (for Individual) A E BOYCE CO INC	Occupation (for Individual) EXECUTIVE
-------------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : SA11A.559519

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. GALLIVAN, PATRICK, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4889 PAYNES MILL ROAD

City LEXINGTON	State KY	Zip Code 40510-9695
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11A.560450

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLO, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12998 LAKE WILDWOOD DR.
 City PENN VALLEY State CA Zip Code 95946-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559234
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GALLO, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12998 LAKE WILDWOOD DR.
 City PENN VALLEY State CA Zip Code 95946-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559286
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GALLO, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12998 LAKE WILDWOOD DR.
 City PENN VALLEY State CA Zip Code 95946-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559287
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLO, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12998 LAKE WILDWOOD DR.
 City PENN VALLEY State CA Zip Code 95946-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561210
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GALLO, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12998 LAKE WILDWOOD DR.
 City PENN VALLEY State CA Zip Code 95946-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561211
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GALLO, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12998 LAKE WILDWOOD DR.
 City PENN VALLEY State CA Zip Code 95946-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561604
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GALLO, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12998 LAKE WILDWOOD DR.
 City PENN VALLEY State CA Zip Code 95946-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561605
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. GARCIA, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 CORONADO DR.
 City GLENDALE State CA Zip Code 91206-2116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF L.A. D.W.P. Occupation (for Individual) ELECTRICAL SUPERVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559525
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GARDNER, GISELA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2320 PIONEER ROAD SUITE P
 City EVANSTON State IL Zip Code 60201-2519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2575.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561430
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARDNER, GISELA, A., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2320 PIONEER ROAD
SUITE P

City EVANSTON State IL Zip Code 60201-2519

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2575.00

Date of Receipt
11 / 05 / 2018
Transaction ID : SA11A.562314

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. GARLOCK, KEITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 221 KNOLL HAVEN DR.

City SEBASTOPOL State CA Zip Code 95472-2853

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

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCIAL SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 23 / 2018
Transaction ID : SA11A.559497

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GARRIOTT, EMILY, B. , MRS. ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1634 COUNTRY CLUB RD

City WILMINGTON State NC Zip Code 28403-4821

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
10 / 29 / 2018
Transaction ID : SA11A.560066

Amount of Each Receipt this Period
1250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GARRIOTT, MICHEAL, H., MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1634 COUNTRY CLUB RD
 City WILMINGTON State NC Zip Code 28403-4821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIVE OAK BANK Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560065
 Amount of Each Receipt this Period 1250.00
 Memo Item CONTRIBUTION

B. GAST, KENTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5759 CHARTEROAK DRIVE
 City CINCINNATI State OH Zip Code 45236-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559284
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. GATES, HELEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 LAURELWOOD DRIVE
 City DANVILLE State CA Zip Code 94506-1409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562526
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2018
Transaction ID : SA11A.559344
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2018
Transaction ID : SA11A.559384
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GERALDS, EMILY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 KIEV CT.
 City WEST BLOOMFIELD State MI Zip Code 48324-1338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.559720
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GERALDS, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 KIEV CT.

City WEST BLOOMFIELD	State MI	Zip Code 48324-1338
-------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.560331

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. GERALDS, EMILY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 KIEV CT.

City WEST BLOOMFIELD	State MI	Zip Code 48324-1338
-------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561482

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 2408 SPRINGHOUSE CIRCLE

City STONE MOUNTAIN	State GA	Zip Code 30087-6762
------------------------	-------------	------------------------

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

Name of Employer (for Individual) PANCAKE PANTRY	Occupation (for Individual) BUSINESS OWNER
-----------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.559883

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GIBONEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 CEDAR CREEK DR.
 City GARLAND State TX Zip Code 75043-1910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018
Transaction ID : SA11A.559164
 Amount of Each Receipt this Period
 3000.00
 Memo Item
 CONTRIBUTION

B. GIBSON, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 BITHYNIA CIRCLE
 City IRMO State SC Zip Code 29063-8930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.560069
 Amount of Each Receipt this Period
 - 500.00
 Memo Item
 CONTRIBUTION
 CHARGED BACK

C. GILBERT, GEORGE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14901 N PENN AVENUE, APT 289
 City OKLAHOMA CITY State OK Zip Code 73134-5963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.562035
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558939

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558959

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11A.559134

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.560192

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.560299

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11A.561010

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11A.561522

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

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

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD	State VA	Zip Code 22153-2215
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2018

Transaction ID : SA11A.562778

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

C. GLEASON, GILBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ALTAMOUNT DRIVE

City ORINDA	State CA	Zip Code 94563-4104
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : SA11A.560436

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GODDIK, HERBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 900 NORTHWEST HILL ROAD
 City MCMINNVILLE State OR Zip Code 97128-9509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563228
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GOFF, RICHARD, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1406
 City GLEN State NH Zip Code 03838-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563234
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. GOODMAN, MICHAEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 ROBINHOOD RD
 City ASHEVILLE State NC Zip Code 28804-1636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559924
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 107 ROBINHOOD RD

City ASHEVILLE	State NC	Zip Code 28804-1636
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2018

Transaction ID : SA11A.563273

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

B. GOODMAN, MURRAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 911 N OCEAN BLVD

City PALM BEACH	State FL	Zip Code 33480-3325
--------------------	-------------	------------------------

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

Name of Employer (for Individual) THE GOODMAN CO.	Occupation (for Individual) COMMERCIAL REAL ESTATE DEVEL
------------------------------------------------------	-------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562056

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. GORMAN, CORNELIUS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2942 MADISON DRIVE

City NAPERVILLE	State IL	Zip Code 60564-1221
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558825

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GOSS, EDWIN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 682847
 City PARK CITY State UT Zip Code 84068-2847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PRIVATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.559615
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GOYETTE, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 319 EAST OAK AVE
 City EL SEGUNDO State CA Zip Code 90245-2428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AEROSPACE CORP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.562205
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GRACE, OLIVER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 BRADLEY PLACE
 City PALM BEACH State FL Zip Code 33480-3738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEVELOPMENT SERVICES LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2018
Transaction ID : SA11A.559292
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GRACE, OLIVER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 BRADLEY PLACE
 City PALM BEACH State FL Zip Code 33480-3738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEVELOPMENT SERVICES LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559293
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GRACE, OLIVER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 BRADLEY PLACE
 City PALM BEACH State FL Zip Code 33480-3738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEVELOPMENT SERVICES LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559428
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. GRACE, OLIVER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 241 BRADLEY PLACE
 City PALM BEACH State FL Zip Code 33480-3738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEVELOPMENT SERVICES LLC Occupation (for Individual) MANAGING MEMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559429
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GRACE, OLIVER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 BRADLEY PLACE

City PALM BEACH	State FL	Zip Code 33480-3738
--------------------	-------------	------------------------

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

Name of Employer (for Individual) DEVELOPMENT SERVICES LLC	Occupation (for Individual) MANAGING MEMBER
---------------------------------------------------------------	------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2018

Transaction ID : SA11A.562808

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. GRACE, OLIVER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 BRADLEY PLACE

City PALM BEACH	State FL	Zip Code 33480-3738
--------------------	-------------	------------------------

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

Name of Employer (for Individual) DEVELOPMENT SERVICES LLC	Occupation (for Individual) MANAGING MEMBER
---------------------------------------------------------------	------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2018

Transaction ID : SA11A.562809

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address 867 PEMBRIDGE DRIVE

City LAKE FOREST	State IL	Zip Code 60045-4202
---------------------	-------------	------------------------

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

Name of Employer (for Individual) WW GRAINGER	Occupation (for Individual) EXECUTIVE
--------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2018

Transaction ID : SA11A.563367

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address **P.O. BOX 950**

City **SENECA** State **IL** Zip Code **61360-0950**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **11 / 05 / 2018**

Transaction ID : SA11A.562342

Amount of Each Receipt this Period **400.00**

Memo Item CONTRIBUTION

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

Mailing Address **23233 N. PIMA RD
STE. 113-367**

City **SCOTTSDALE** State **AZ** Zip Code **85255-8388**

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

Name of Employer (for Individual) **GRAY & ASSOCIATES INC.** Occupation (for Individual) **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **10 / 31 / 2018**

Transaction ID : SA11A.561611

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAY, ROBERT, B., ,

Mailing Address **13953 E. ARIZONA AVE**

City **AURORA** State **CO** Zip Code **80012-4649**

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 01 / 2018**

Transaction ID : SA11A.561763

Amount of Each Receipt this Period **30.00**

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **1430.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREENE, LAWRENCE, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 GOODNOW ROAD
 City PRINCETON State MA Zip Code 01541-1602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560476
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. GREENMAN, MARGUERITE, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 NORTHWAY
 City BALTIMORE State MD Zip Code 21218-1141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE JOSEPH MULLAN CO Occupation (for Individual) PROPERTY MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561418
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. GREENE, RITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20090 BOCA WEST DRIVE 352
 City BOCA RATON State FL Zip Code 33434-5225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.559014
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	950.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 2408SKYLINE POINTE

City JONESBORO	State AR	Zip Code 72404-8079
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11A.559558

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

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

Mailing Address 2408SKYLINE POINTE

City JONESBORO	State AR	Zip Code 72404-8079
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.559688

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. GREER, SHIRLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4703 PARK AVE

City NASHVILLE	State TN	Zip Code 37209-3435
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2018

Transaction ID : SA11A.559310

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GREER, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4703 PARK AVE
 City NASHVILLE State TN Zip Code 37209-3435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559311
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. GREHN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5413 BRAEBURN DR.
 City BELLAIRE State TX Zip Code 77401-4702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559666
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. GREMBAN, ROBERT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 QUAIL DRIVE NORTH
 City PHOENIXVILLE State PA Zip Code 19460-1080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PFIZER Occupation (for Individual) REGULATORY AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559999
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GREWE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14551 AERIES WAY DR.
 City FORT MYERS State FL Zip Code 33912-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2018
Transaction ID : SA11A.559498
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. GROSS, PAUL, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7640 W MAIN STREET
 City DECATUR State IL Zip Code 62522-9689
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562334
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. GROVE, MARILYN, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4306 KENSINGTON DR.
 City SHASTA LAKE State CA Zip Code 96019-2268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561379
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GROVE, MARILYN, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 4306 KENSINGTON DR.
City SHASTA LAKE State CA Zip Code 96019-2268
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563247
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. GUIDRY, LORI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5406 W 149TH PL UNIT 1
City HAWTHORNE State CA Zip Code 90250-9446
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559532
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GUIDRY, LORI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5406 W 149TH PL UNIT 1
City HAWTHORNE State CA Zip Code 90250-9446
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560858
Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. GUIDRY, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5406 W 149TH PL UNIT 1
 City HAWTHORNE State CA Zip Code 90250-9446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt
 10 / 30 / 2018
Transaction ID : SA11A.561199
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. GUIDRY, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5406 W 149TH PL UNIT 1
 City HAWTHORNE State CA Zip Code 90250-9446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt
 11 / 02 / 2018
Transaction ID : SA11A.562123
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. GUIDRY, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5406 W 149TH PL UNIT 1
 City HAWTHORNE State CA Zip Code 90250-9446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt
 11 / 02 / 2018
Transaction ID : SA11A.562124
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GUIDRY, LORI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5406 W 149TH PL UNIT 1
 City HAWTHORNE State CA Zip Code 90250-9446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562941
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. GULLQUIST, HERBERT, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 530 COCONUT PALM RD
 City VERO BEACH State FL Zip Code 32963-3711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560056
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. HAAB, KETURAH, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 PINE BRAE STREET
 City ANN ARBOR State MI Zip Code 48105-2723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559894
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	25125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HABIB, AMELIA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 940 CAPE MARCO DRIVE
 City MARCO ISLAND State FL Zip Code 34145-6311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562280
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HAMMOND, JANE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12117 CREEKHAVEN DR.
 City SAINT LOUIS State MO Zip Code 63131-3824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558894
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HAMMOND, JANE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12117 CREEKHAVEN DR.
 City SAINT LOUIS State MO Zip Code 63131-3824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561918
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANES, M.D., THOMAS, E., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5223 HEATHROW HILLS DRIVE
 City BRENTWOOD State TN Zip Code 37027-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560455
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HANEY, ANNE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 419
 City GRAND GORGE State NY Zip Code 12434-0419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561083
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HANEY, ANNE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 419
 City GRAND GORGE State NY Zip Code 12434-0419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563171
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HANSON, JACKSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26790 WASHINGTON BLVD NE
 City KINGSTON State WA Zip Code 98346-7688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559400
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. HARMAN, STEWART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7094 CATHEDRAL DRIVE
 City BLOOMFIELD HILLS State MI Zip Code 48301-3728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FCAGROUP Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558836
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HARRIS, DAVID, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 0 MCCARTHY AVENUE
 City LANGHORNE State PA Zip Code 19047-5538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS COMFORT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559947
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRINGTON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 VIA DELFIN
 City SAN CLEMENTE State CA Zip Code 92672-2467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561556
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HARRINGTON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 VIA DELFIN
 City SAN CLEMENTE State CA Zip Code 92672-2467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561557
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HARRINGTON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 510 VIA DELFIN
 City SAN CLEMENTE State CA Zip Code 92672-2467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.563034
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HARRISON, RALPH, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 4276

City VENTURA	State CA	Zip Code 93007-0276
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11A.563168

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. HARRISON, RALPH, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 4276

City VENTURA	State CA	Zip Code 93007-0276
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

Transaction ID : SA11A.563317

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. HARRIS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19 CHESTNUT ST

City NEWPORT	State RI	Zip Code 02840-1955
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : SA11A.560434

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. HARRIS M.D., STUART, L., DR., MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2851 SEMINOLE STREET
 City COCONUT GROVE State FL Zip Code 33133-3234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561422
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. HARRIS, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 THELMA DRIVE
 City SAN ANTONIO State TX Zip Code 78212-2455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INDEP TRAVEL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562561
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. HARTMAN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25962 VIA DEL REY
 City SAN JUAN CAPISTRAN State CA Zip Code 92675-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561793
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAUG, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6367 S WALDEN WAY
 City AURORA State CO Zip Code 80016-1150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561660
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. HAUSER, HENRY, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 385
 City CHARLESTON State AR Zip Code 72933-0385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560419
 Amount of Each Receipt this Period 45.00
 Memo Item CONTRIBUTION

C. HAYDEN, AGNES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 PENINSULA DRIVE
 City TRAVERSE CITY State MI Zip Code 49686-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559960
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 132 OF 367
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HAYTHE, THOMAS, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 LAMBOLL ST.
 City CHARLESTON State SC Zip Code 29401-2314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **10 / 26 / 2018**
Transaction ID : SA11A.560556
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HEAFITZ, JONATHAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2704 EMMET ROAD
 City SILVER SPRING State MD Zip Code 20902-4832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCMA Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt **11 / 16 / 2018**
Transaction ID : SA11A.563376
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. HEAL, EARL, , COL.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 SPRING LANE
 City VACAVILLE State CA Zip Code 95688-4200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 05 / 2018**
Transaction ID : SA11A.562433
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. HEIDER, JON, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 STOCKBRIDGE ROAD
 City AKRON State OH Zip Code 44313-4580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559914
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

B. HEITZ, MARK, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 SW YORKSHIRE ROAD
 City TOPEKA State KS Zip Code 66606-2283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561988
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HELLER, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30073 DEER RUN
 City FARMINGTON HILLS State MI Zip Code 48331-6011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560063
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HENDERSON, PATRICIA, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 732 CORTLANDT DRIVE

City SACRAMENTO	State CA	Zip Code 95864-7251
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SCAN MEDICAL SERVICES	Occupation (for Individual) TRANSCRIPTION
------------------------------------------------------------	----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.560044

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

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

Mailing Address 3601 TWIN LAKES WAY

City PLANO	State TX	Zip Code 75093-7538
---------------	-------------	------------------------

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

Name of Employer (for Individual) TCH PARTNERS LLC	Occupation (for Individual) CONSULTANT
-------------------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558967

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. HENSCH, ANNA, B., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1009 PEERMAN PLACE

City CORPUS CHRISTI	State TX	Zip Code 78411-2243
------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) TEACHER
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562286

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HERBERT, JAMES, , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 PINE ST
 FL 2
 City SAN FRANCISCO State CA Zip Code 94111-5606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIRST REPUBLIC BANK Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558769
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. HERTEL, RAYMOND, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20505 EAST COUNTRY CLUB DRIVE
 PH 35
 City MIAMI State FL Zip Code 33180-3441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559868
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. HESTER, SALLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 SENECA STREET EXT
 City CALHOUN FALLS State SC Zip Code 29628-9328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 13 / 2018
Transaction ID : SA11A.563314
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HEWITT, RAY, V., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 413 S SHORE DRIVE

City CLEAR LAKE	State IA	Zip Code 50428-2542
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CLEAR LAKE BANK & TRUST	Occupation (for Individual) BANKER
--------------------------------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562341

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

B. HILL, ALICE, W., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2 BRIDGEWORTH LANE

City SHERMAN	State CT	Zip Code 06784-1931
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11A.561346

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. HILL, FRANK, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 710 NW 41ST STREET

City OKLAHOMA CITY	State OK	Zip Code 73118-7030
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : SA11A.560428

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HILL, MARJORIE, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16214 E GLENPOINT DRIVE
 City FOUNTAIN HILLS State AZ Zip Code 85268-3120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560401
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. HILSINGER, ARTHUR, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 JACKSON POND RD
 City DEDHAM State MA Zip Code 02026-5524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 20 / 2018
Transaction ID : SA11A.563377
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HODGES, ROY, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 663
 City DUMAS State MS Zip Code 38625-0663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561102
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. HOGAN, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15491 ESTANCIA LANE
 City WELLINGTON State FL Zip Code 33414-7408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2018
Transaction ID : SA11A.559446
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 CONTRIBUTION

B. HOHLT, RICHARD, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7901 KENT RD
 City ALEXANDRIA State VA Zip Code 22308-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018
Transaction ID : SA11A.560053
 Amount of Each Receipt this Period
 2700.00
 Memo Item
 CONTRIBUTION

C. HOLES, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 THE STRAND
 City MANHATTAN BEACH State CA Zip Code 90266-4742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.562019
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. HOLT, HAROLD, JACK, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 SARAH ELIZABETH WAY
 City TAYLORSVILLE State KY Zip Code 40071-8780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559093
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HOMBACH, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 FARRINGTON DRIVE
 City LINCOLNSHIRE State IL Zip Code 60069-2505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561356
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. HONARKAR, MOHAMMAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 MYSTIC VIEW
 City LAGUNA BEACH State CA Zip Code 92651-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 4G VENTURES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.562234
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. HOVIS, AMANDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 CAMPGROUND RD
 City SPARTANBURG State SC Zip Code 29303-4411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558738
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HOWERTH, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14515 W.GRANITE VALLEY DR. B-510
 City SUN CITY WEST State AZ Zip Code 85375-6021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558984
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HOWERTH, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14515 W.GRANITE VALLEY DR. B-510
 City SUN CITY WEST State AZ Zip Code 85375-6021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558985
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HOWERTH, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14515 W.GRANITE VALLEY DR. B-510

City SUN CITY WEST	State AZ	Zip Code 85375-6021
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2018

Transaction ID : SA11A.560170

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

B. HSU, JEAN, SHU-TSU, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 DELAWARE AVENUE

City ITHACA	State NY	Zip Code 14850-4709
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
905.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562285

Amount of Each Receipt this Period
270.00

Memo Item CONTRIBUTION

C. HUANG, J, ANDREW, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2212 ROSA VISTA TER

City CAMARILLO	State CA	Zip Code 93012-9094
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : SA11A.560996

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1770.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 7501 EAST THOMPSON PEAK PARKWAY
UNIT 520

City SCOTTSDALE State AZ Zip Code 85255-4540

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 24 / 2018
Transaction ID : SA11A.559129

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 3 SMITHDALE CT

City HOUSTON State TX Zip Code 77024-6824

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 29 / 2018
Transaction ID : SA11A.560794

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. HUMPHREY, JOANN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3025 GLEN FLORA WAY

City FORT SMITH State AR Zip Code 72908-9307

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt
10 / 18 / 2018
Transaction ID : SA11A.558666

Amount of Each Receipt this Period
10.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUMPHREY, JOANN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 GLEN FLORA WAY
 City FORT SMITH State AR Zip Code 72908-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558669
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. HUMPHREY, JOANN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 GLEN FLORA WAY
 City FORT SMITH State AR Zip Code 72908-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559504
 Amount of Each Receipt this Period 15.00
 Memo Item CONTRIBUTION

C. HUMPHREY, JOANN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 GLEN FLORA WAY
 City FORT SMITH State AR Zip Code 72908-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560909
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 35.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUMPHREY, JOANN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 GLEN FLORA WAY
 City FORT SMITH State AR Zip Code 72908-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562918
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

B. HUMPHREY, JOANN, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3025 GLEN FLORA WAY
 City FORT SMITH State AR Zip Code 72908-9307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.563116
 Amount of Each Receipt this Period 10.00
 Memo Item CONTRIBUTION

C. HUNT, ALVARO, T., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 CITRUS RD
 City NEW ORLEANS State LA Zip Code 70123-2043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FORENSIC PATHOLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561858
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUNT, JAMES, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 528 2ND STREET
City MANHATTAN BEACH State CA Zip Code 90266-6516
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561318
Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HUNTER, JOHN, N., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 848 MIRAMONTE DR.
City SANTA BARBARA State CA Zip Code 93109-1422
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559614
Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. HUNTLEY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 74 BEVIN RD
City NORTHPORT State NY Zip Code 11768-1134
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561991
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. HUTCHISON, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4543 E. ANAHEIM STREET
 NONE
 City LLONG BEACH State CA Zip Code 90804-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARAGON EQUITIES Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562538
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. IRBY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1817 TYNE BLVD.
 SUITE 803
 City NASHVILLE State TN Zip Code 37215-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IRBY INVESTMENTS LLC Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562424
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. IRBY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1817 TYNE BLVD.
 SUITE 803
 City NASHVILLE State TN Zip Code 37215-4701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IRBY INVESTMENTS LLC Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562425
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IRWIN, THOMAS, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 469

City TRAVERSE CITY	State MI	Zip Code 49685-0469
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Date of Receipt
11 / 02 / 2018
Transaction ID : SA11A.562152

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. IVANCIC, CHARLOTTE, S., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1212 NEW YORK AVE NW STE 1050

City WASHINGTON	State DC	Zip Code 20005-6135
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) TARPLIN DOWNS & YOUNG		Occupation (for Individual) PARTNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12500.00	

Date of Receipt
11 / 02 / 2018
Transaction ID : SA11A.562016

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

C. IVERSON, MARC, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5200 BEVINGTON PLACE

City CHARLOTTE	State NC	Zip Code 28277-5504
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 6000.00	

Date of Receipt
10 / 20 / 2018
Transaction ID : SA11A.559441

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 148 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. IVERSON, MARC, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5200 BEVINGTON PLACE
 City CHARLOTTE State NC Zip Code 28277-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561455
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. JACKSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2818 SARATOGA LANE
 City TUSCALOOSA State AL Zip Code 35406-2708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALABAMA DERMATOLOGY Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558820
 Amount of Each Receipt this Period 600.00
 Memo Item CONTRIBUTION

C. JAIRAMANI, GAGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4755 S 167TH EAST AVENUE
 City TULSA State OK Zip Code 74134-7131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558819
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1850.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 149 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. JAMIESON, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10354 QUAIL CROWN DRIVE
 City NAPLES State FL Zip Code 34119-8832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559790
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. JAMIESON, THOMAS, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10354 QUAIL CROWN DRIVE
 City NAPLES State FL Zip Code 34119-8832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563143
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. JANNEY, KIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18451 DELAWARE STREET
 City HUNTINGTON BEACH State CA Zip Code 92648-1415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559807
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. JOHNSTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 BLAZEWOOD
 City Foothill Ranch State CA Zip Code 92610-1864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 30 / 2018**
Transaction ID : SA11A.561193
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

B. JOHNSTON, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 BLAZEWOOD
 City Foothill Ranch State CA Zip Code 92610-1864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWARD JONES Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 30 / 2018**
Transaction ID : SA11A.561194
 Amount of Each Receipt this Period **100.00**
 Memo Item CONTRIBUTION

C. KAEMERLE, HAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 SAN DIEGO AVE SUITE 205
 City San Diego State CA Zip Code 92110-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAROLD KAEMERLE Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 19 / 2018**
Transaction ID : SA11A.558872
 Amount of Each Receipt this Period **500.00**
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. KECK, ALLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13622 PASEO DE LA HUERTA
 City POWAY State CA Zip Code 92064-2100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRIMARK Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562383
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. KEEFE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 SARASOTA CENTER BLVD
 NA
 City SARASOTA State FL Zip Code 34240-7852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 22 / 2018
Transaction ID : SA11A.559246
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. KEEFE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 SARASOTA CENTER BLVD
 NA
 City SARASOTA State FL Zip Code 34240-7852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 10 / 30 / 2018
Transaction ID : SA11A.561202
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KELTON, ROBERT, , ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2018 Transaction ID : SA11A.562076
Mailing Address 105 KRUMBHAAR CIRCLE		Amount of Each Receipt this Period 1000.00
City HOUMA	State LA	Zip Code 70360-5586
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) TERREBONNE INV PROPERTIES LLC	Occupation (for Individual) MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KELTON, ROBERT, , ,		Date of Receipt MM / DD / YYYY 11 / 02 / 2018 Transaction ID : SA11A.562077
Mailing Address 105 KRUMBHAAR CIRCLE		Amount of Each Receipt this Period 1000.00
City HOUMA	State LA	Zip Code 70360-5586
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) TERREBONNE INV PROPERTIES LLC	Occupation (for Individual) MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KENNEDY, CHRISTOPHER, , ,		Date of Receipt MM / DD / YYYY 10 / 18 / 2018 Transaction ID : SA11A.558655
Mailing Address 212 ASHBOURNE DR.		Amount of Each Receipt this Period 250.00
City NOBLESVILLE	State IN	Zip Code 46060-4276
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) HARTSON-KENNEDY	Occupation (for Individual) OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KENNEDY, CHRISTOPHER, , ,

Mailing Address **212 ASHBOURNE DR.**

City NOBLESVILLE	State IN	Zip Code 46060-4276
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) HARTSON-KENNEDY	Occupation (for Individual) OWNER
-------------------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 05 / 2018

Transaction ID : SA11A.563049

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address **P.O. BOX 941**

City POINT CLEAR	State AL	Zip Code 36564-0941
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) OIL AND GAS
-----------------------------------------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
10 / 31 / 2018

Transaction ID : SA11A.561366

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KEYES, GEOFFREY, J., MR.,

Mailing Address **169 STACEY HOLLOW LN**

City LAFAYETTE	State IN	Zip Code 47905-7598
--------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
950.00

Date of Receipt
10 / 20 / 2018

Transaction ID : SA11A.559394

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KEYES, GEOFFREY, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 STACEY HOLLOW LN
 City LAFAYETTE State IN Zip Code 47905-7598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562173
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KIMBELL, RAYMOND, S. , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 94903
 City WICHITA FALLS State TX Zip Code 76308-0903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BURK ROYALTY Occupation (for Individual) OIL PRODUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562107
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. KIMBERLY, RICHARD, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CONSTITUTION AVE NW STE 921
 City WASHINGTON State DC Zip Code 20001-2133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIMBERLY CONSULTING LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560055
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KING, CG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 KNIGHT AVENUE
 City SEQUIM State WA Zip Code 98382-8102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 24 / 2018**
Transaction ID : SA11A.560344
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. KING, RITA, G., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7562 CRESTVIEW DR.
 City NIWOT State CO Zip Code 80504-7301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4362.00

Date of Receipt **11 / 14 / 2018**
Transaction ID : SA11A.563283
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KIRSCH, CLAYTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 SW 124TH AVE.
 City BEAVERTON State OR Zip Code 97005-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLUMBIA FORESTRY LLC Occupation (for Individual) FORESTRY CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 26 / 2018**
Transaction ID : SA11A.560581
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KITTERMAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 WESTLAKE AVE N 912
 City SEATTLE State WA Zip Code 98109-4879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559493
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. KITTERMAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 WESTLAKE AVE N 912
 City SEATTLE State WA Zip Code 98109-4879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559693
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. KITTERMAN, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1209 WESTLAKE AVE N 912
 City SEATTLE State WA Zip Code 98109-4879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559694
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. KLOSS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 RIDGEWOOD AVENUE
 City GLEN ELLYN State IL Zip Code 60137-4916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562988
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KLOSS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 RIDGEWOOD AVENUE
 City GLEN ELLYN State IL Zip Code 60137-4916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.563095
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. KLOSS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 RIDGEWOOD AVENUE
 City GLEN ELLYN State IL Zip Code 60137-4916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.563096
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 158 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. KLOSS, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 RIDGEWOOD AVENUE
 City GLEN ELLYN State IL Zip Code 60137-4916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.563097
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KNAPP, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7450 ROSSMORE CT.
 City DAYTON State OH Zip Code 45459-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559251
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KNAPP, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7450 ROSSMORE CT.
 City DAYTON State OH Zip Code 45459-4213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560804
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 367
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 7450 ROSSMORE CT.

City DAYTON	State OH	Zip Code 45459-4213
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561667

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 7450 ROSSMORE CT.

City DAYTON	State OH	Zip Code 45459-4213
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562493

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 7450 ROSSMORE CT.

City DAYTON	State OH	Zip Code 45459-4213
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2018

Transaction ID : SA11A.562979

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 160 OF 367
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. KNEE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 733 PLANTATION ESTATES DR.
B 211

City MATTHEWS	State NC	Zip Code 28105-9116
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11A.560534

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

B. KNEE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 733 PLANTATION ESTATES DR.
B 211

City MATTHEWS	State NC	Zip Code 28105-9116
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11A.560535

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KNEE, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 733 PLANTATION ESTATES DR.
B 211

City MATTHEWS	State NC	Zip Code 28105-9116
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11A.561578

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. KNIGHT, MITZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 337
 City ROSICLARE State IL Zip Code 62982-0337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 11 / 02 / 2018
Transaction ID : SA11A.562188
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. KOLEK, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5006 GREENBRIAR TRAIK
 City MOUNT DORA State FL Zip Code 32757-9100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 31 / 2018
Transaction ID : SA11A.561486
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KOLEK, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5006 GREENBRIAR TRAIK
 City MOUNT DORA State FL Zip Code 32757-9100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 31 / 2018
Transaction ID : SA11A.561575
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. KOLEK, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5006 GREENBRIAR TRAIK
 City MOUNT DORA State FL Zip Code 32757-9100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561825
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KOLEK, CLARENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5006 GREENBRIAR TRAIK
 City MOUNT DORA State FL Zip Code 32757-9100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562452
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. KROL, JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4851 BONITA BAY BLVD PH101 PH 101
 City BONITA SPRINGS State FL Zip Code 34134-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559136
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. KROMMENHOEK, WILLIAM, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1435 VUE DU BAY COURT
 City SAN DIEGO State CA Zip Code 92109-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562348
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. KUECKER, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 WEST MARKEY ROAD
 City BELTON State MO Zip Code 64012-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KUECKER LOGISTICS GROUP INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559159
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LABRIOLA, FRANCIS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12013 S HONAH LEE COURT
 City PHOENIX State AZ Zip Code 85044-3452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561061
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. LACY, DUANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16397 SHERIDAN DR.
 City PARKER State CO Zip Code 80134-9330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560541
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LAIB, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 775 OAKWOOD DRIVE RD 3
 City KINGSTON State NY Zip Code 12401-7818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.561285
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LAMOUREAX, B, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12881 SEAHORSE DRIVE
 City RANCHO CUCAMONGA State CA Zip Code 91739-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559801
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LANSON, LUCIENNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1497 HULRBUT LANE
 City SEBASTOPOLE State CA Zip Code 95472-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562436
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LATHAM, JAMES, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5005 BRIDGEWATER DRIVE
 City ARLINGTON State TX Zip Code 76017-2778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559113
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LATRACE, ADRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9388 PEBBLE BEACH CT E
 City SEMINOLE State FL Zip Code 33777-4532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOYD INDUSTRIES INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.559026
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. LAUGHLIN, ALEXANDER, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 EAST 77TH STREET
 APT 14A
 City NEW YORK State NY Zip Code 10075-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561324
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. LAUGHLIN JR., HAROLD, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1325 JEFFERSON AVENUE
 City DOWNERS GROVE State IL Zip Code 60516-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562312
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. LEA, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 CLIFFEWOOD PLACE
 City SHREVEPORT State LA Zip Code 71106-7703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558882
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 100 POPPE LANE,
APT 106

City NASHUA State IA Zip Code 50658-9705

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559814

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

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

Mailing Address 100 POPPE LANE,
APT 106

City NASHUA State IA Zip Code 50658-9705

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562253

Amount of Each Receipt this Period 30.00

Memo Item CONTRIBUTION

C. LEBLANC, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2759 RIDGEWAY AVE.

City ROCHESTER State NY Zip Code 14626-4210

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562735

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. LEE, TSAIFENG, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 E 2620 N
 City PROVO State UT Zip Code 84604-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 795.00

Date of Receipt **10 / 25 / 2018**
Transaction ID : SA11A.559930
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. LEE, TSAIFENG, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 722 E 2620 N
 City PROVO State UT Zip Code 84604-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 795.00

Date of Receipt **11 / 06 / 2018**
Transaction ID : SA11A.563166
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEONARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address DONALD ST.
 City JOHNSON CITY State NY Zip Code 13790-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 25 / 2018**
Transaction ID : SA11A.560088
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. LEONARD, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 25 / 2018 Transaction ID : SA11A.560089
Mailing Address DONALD ST.		Amount of Each Receipt this Period 25.00
City JOHNSON CITY	State NY	Zip Code 13790-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LEONARD, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 25 / 2018 Transaction ID : SA11A.560100
Mailing Address DONALD ST.		Amount of Each Receipt this Period 30.00
City JOHNSON CITY	State NY	Zip Code 13790-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. LEONARD, JAMES, , ,		Date of Receipt MM / DD / YYYY 10 / 25 / 2018 Transaction ID : SA11A.560101
Mailing Address DONALD ST.		Amount of Each Receipt this Period 30.00
City JOHNSON CITY	State NY	Zip Code 13790-
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. LEONARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address DONALD ST.
 City JOHNSON CITY State NY Zip Code 13790-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 02 / 2018
Transaction ID : SA11A.562071
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. LEONARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address DONALD ST.
 City JOHNSON CITY State NY Zip Code 13790-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 02 / 2018
Transaction ID : SA11A.562072
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. LEONARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address DONALD ST.
 City JOHNSON CITY State NY Zip Code 13790-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 11 / 03 / 2018
Transaction ID : SA11A.562863
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEONARD, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address DONALD ST.
 City JOHNSON CITY State NY Zip Code 13790-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562864
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. LEOPOLD, AUGIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 NEWCOMB BLVD
 City NEW ORLEANS State LA Zip Code 70118-5527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUGIE LEOPOLD ADVERTISING Occupation (for Individual) MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562546
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. LEWIS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560227
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 155.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 708 CAVALIER DR.
City VIRGINIA BEACH State VA Zip Code 23451-3838
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560229
Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. LEWIS, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 708 CAVALIER DR.
City VIRGINIA BEACH State VA Zip Code 23451-3838
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560569
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. LEWIS, ELIZABETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 708 CAVALIER DR.
City VIRGINIA BEACH State VA Zip Code 23451-3838
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560570
Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. LEWIS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2018
Transaction ID : SA11A.560861
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. LEWIS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2018
Transaction ID : SA11A.560862
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. LEWIS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2018
Transaction ID : SA11A.560874
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560875
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. LEWIS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562395
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. LEWIS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 CAVALIER DR.
 City VIRGINIA BEACH State VA Zip Code 23451-3838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562396
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LEWIS, VERNON, F., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 EAST SANTA CRUZ DRIVE

City GOODYEAR	State AZ	Zip Code 85338-1429
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2018

Transaction ID : SA11A.563196

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. LEWIS, VERNON, F., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 EAST SANTA CRUZ DRIVE

City GOODYEAR	State AZ	Zip Code 85338-1429
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2018

Transaction ID : SA11A.563227

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 9001 AVENUE 360

City VISALIA	State CA	Zip Code 93291-8947
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2018

Transaction ID : SA11A.561377

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIESKE, ETHEL, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 534 S MARGARET STREET

City MARKESAN	State WI	Zip Code 53946-7140
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.559928

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

B. LIESKE, ETHEL, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 534 S MARGARET STREET

City MARKESAN	State WI	Zip Code 53946-7140
------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562254

Amount of Each Receipt this Period
60.00

Memo Item CONTRIBUTION

C. LINDLEY, LINDA, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2913 STRATFORD DRIVE

City AUGUSTA	State GA	Zip Code 30909-3527
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
313.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561425

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIPSEY, SUZANNE, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559407
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LIPSEY, SUZANNE, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 7795
 City AVON State CO Zip Code 81620-7795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559408
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LITTLE, GENE, E. , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2910 GROYDON DRIVE NW
 City CANTON State OH Zip Code 44718-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563276
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LIU, PHILIP, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 650 PARK ST.

City HONESDALE	State PA	Zip Code 18431-1470
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.560103

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address 262EGGLESTON AVE
APT D

City ELMHURST	State IL	Zip Code 60126-3885
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.559587

Amount of Each Receipt this Period
600.00

Memo Item
CONTRIBUTION

C. LOVE, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 260

City HEALY	State AK	Zip Code 99743-0260
---------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : SA11A.558711

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. LOVE, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 260
 City HEALY State AK Zip Code 99743-0260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018
Transaction ID : SA11A.558714
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. LOVE, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 260
 City HEALY State AK Zip Code 99743-0260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2018
Transaction ID : SA11A.562752
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. LOVELACE, LORRAINE, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4974 RIO VERDE DRIVE
 City SAN JOSE State CA Zip Code 95118-2303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2018
Transaction ID : SA11A.560439
 Amount of Each Receipt this Period
 225.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 9121 PATTIE DR.

City BOISE	State ID	Zip Code 83704-2943
---------------	----------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558841

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. LUKE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9121 PATTIE DR.

City BOISE	State ID	Zip Code 83704-2943
---------------	----------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : SA11A.559017

Amount of Each Receipt this Period
35.00

Memo Item CONTRIBUTION

C. LUKE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9121 PATTIE DR.

City BOISE	State ID	Zip Code 83704-2943
---------------	----------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : SA11A.559542

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. LUKE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9121 PATTIE DR.
 City BOISE State ID Zip Code 83704-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561148
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. LUNDQUIST, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6277 NORTH OCEAN BLVD
 City BOYNTON BEACH State FL Zip Code 33435-5211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562967
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. LUTHER, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1941 FRIENDSHIP DRIVE A STE A
 City EL CAJON State CA Zip Code 92020-1144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPLIED HYDROGEOLOGIC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561170
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MACNAUGHT, MALCOLM, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8225 SE GOLFHOUSE DRIVE
 City HOBE SOUND State FL Zip Code 33455-8019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563156
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MADDUX, RAYMOND, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2413 HARMS CIR
 City PORT NECHES State TX Zip Code 77651-4807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559611
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MADDUX, RAYMOND, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2413 HARMS CIR
 City PORT NECHES State TX Zip Code 77651-4807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562346
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 184 OF 367
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MALONEY, J MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 48 REMSEN STREET

City BROOKLYN HEIGHTS	State NY	Zip Code 11201-4106
--------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561376

Amount of Each Receipt this Period
150.00

Memo Item
CONTRIBUTION

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

Mailing Address PO BOX 117

City BOWLING GREEN	State VA	Zip Code 22427-0117
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) PITTS AND MANNS REALTY INC.	Occupation (for Individual) BROKER
------------------------------------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11A.560062

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 5011 DONOVAN DR. SE
STE 2

City OLYMPIA	State WA	Zip Code 98501-4835
-----------------	-------------	------------------------

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

Name of Employer (for Individual) EMPLOYMENT SECURITY DEPARTMENT	Occupation (for Individual) SR. MGT POLICY ANALYST
---------------------------------------------------------------------	-------------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : SA11A.558614

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MANTE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5011 DONOVAN DR. SE
 STE 2
 City OLYMPIA State WA Zip Code 98501-4835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMPLOYMENT SECURITY DEPARTMENT Occupation (for Individual) SR. MGT POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.559473
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. MANTE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5011 DONOVAN DR. SE
 STE 2
 City OLYMPIA State WA Zip Code 98501-4835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMPLOYMENT SECURITY DEPARTMENT Occupation (for Individual) SR. MGT POLICY ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562063
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

C. MARIE, BEATRICE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8911 MCGREGOR DRIVE
 City CHEVY CHASE State MD Zip Code 20815-4707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561405
 Amount of Each Receipt this Period 600.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	875.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARKOWITZ, LANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4810 PALM
 City LA CANADA FLINTRID State CA Zip Code 91011-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559232
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARKOWITZ, LANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4810 PALM
 City LA CANADA FLINTRID State CA Zip Code 91011-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNION Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559430
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MARSON, ALLAN, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4150 THAIN WAY
 City PALO ALTO State CA Zip Code 94306-3928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562564
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MARSON, ALLAN, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4150 THAIN WAY

City PALO ALTO	State CA	Zip Code 94306-3928
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2018

Transaction ID : SA11A.563028

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MARSON, ALLAN, K., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4150 THAIN WAY

City PALO ALTO	State CA	Zip Code 94306-3928
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2018

Transaction ID : SA11A.563029

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MARTIN, EDWARD, S., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 WOODBERRY ROAD

City NEW KENSINGTON	State PA	Zip Code 15068-5308
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2018

Transaction ID : SA11A.561296

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 OF 367 (check only one)
<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MARTIN, EDWARD, S., MR.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2018 Transaction ID : SA11A.561695		
Mailing Address 1046 WOODBERRY ROAD			Amount of Each Receipt this Period 600.00		
City NEW KENSINGTON	State PA	Zip Code 15068-5308	Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3200.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARTIN, ELLEN, W., MS.,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 06 / 2018 Transaction ID : SA11A.563201		
Mailing Address 4955 GLENBROOK ROAD NORTHWEST			Amount of Each Receipt this Period 1000.00		
City WASHINGTON	State DC	Zip Code 20016-3222	Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) HOMEMAKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARTIN, GEORGE, F., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2018 Transaction ID : SA11A.562029		
Mailing Address 6300 COLONIAL WAY APT 322			Amount of Each Receipt this Period 200.00		
City MINNEAPOLIS	State MN	Zip Code 55436-2282	Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MARTIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10095 LAWYERS RD.
 City VIENNA State VA Zip Code 22181-2939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LIVINGSTON GROUP Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560583
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MARTIN, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 190 E GIRARD PLACE APT 703
 City ENGLEWOOD State CO Zip Code 80113-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560036
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MC DONALD, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2525 FOX RUN ROAD SW APT 9
 City WYOMING State MI Zip Code 49519-4116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2244.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560420
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MCBEE, RICHARD, , ,		Date of Receipt
Mailing Address 272 VALLEY VIEW LANE		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2018"/>
City INDIAN SPRINGS	State AL	Zip Code 35124-3635
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.562141
Name of Employer (for Individual) OFFICE MOVERS INC.		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) OWNER		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCCARTHY, EDWARD, C., MR.,		Date of Receipt
Mailing Address 1318 CANTERBURY ROAD		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2018"/>
City RALEIGH	State NC	Zip Code 27608-1902
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.560027
Name of Employer (for Individual) RIVER CITIES		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) VENTURE INVESTORY		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCCLAIN, RICHARD, , ,		Date of Receipt
Mailing Address 12185 N. 114TH WAY		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2018"/>
City CHICAGO	State AZ	Zip Code 85259-2616
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11A.560856
Name of Employer (for Individual) HIGH STREET CAPITAL		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) PRINCIPAL		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCCORMICK, MICHAEL, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3227 COLORADO PLACE
 City COSTA MESA State CA Zip Code 92626-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559854
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MCFALL, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8502 REATA WAY
 City ATASCADERO State CA Zip Code 93422-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PALOMINO PROPANE Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559509
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MCFALL, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8502 REATA WAY
 City ATASCADERO State CA Zip Code 93422-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PALOMINO PROPANE Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561131
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MCFALL, MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8502 REATA WAY
 City ATASCADERO State CA Zip Code 93422-5318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PALOMINO PROPANE Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561132
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MCGRAW, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5333 SETTLERS PASS
 City KENTWOOD State MI Zip Code 49512-9652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTBROOK HOMES Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559244
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. MCKAY, EMILY, B. , MS. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 OENOKE LANE
 City NEW CANAAN State CT Zip Code 06840-4515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563277
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MCKNIGHT, MARY, , ,		Date of Receipt MM / DD / YYYY 10 / 24 / 2018
Mailing Address 1113 DAYTON RIAD		Transaction ID : SA11A.560292
City MIDLAND	State TX	Zip Code 79706-3806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MCLAIN, JOHN, , ,		Date of Receipt MM / DD / YYYY 10 / 28 / 2018
Mailing Address 3777 RAVENS GLEN DR.		Transaction ID : SA11A.560835
City COLUMBUS	State OH	Zip Code 43221-4458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) ARGEN CORPORATION	Occupation (for Individual) SALESMAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MCLOUGHLIN, JAMES, W., REV.,		Date of Receipt MM / DD / YYYY 11 / 01 / 2018
Mailing Address 11335 BELLFLOWER LANE		Transaction ID : SA11A.561704
City HUNTLEY	State IL	Zip Code 60142-7796
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MCNARY, WILSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1315 VERANO DRIVE
 City PALM SPRINGS State CA Zip Code 92264-8449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2018
Transaction ID : SA11A.559077
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. MEADOWS, GILBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 807 CONTOUR DR.
 City SAN ANTONIO State TX Zip Code 78212-1703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.563129
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. MEDLEY JR., JOHN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4425 MITCHELL COURT
 City OWENSBORO State KY Zip Code 42303-1839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.562041
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MEIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 867 12TH ST SE P.O. BOX 1406
 City LE MARS State IA Zip Code 51031-1406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560133
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MERRILL, LINDA, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 399 LONG RIDGE ROAD
 City BEDFORD State NY Zip Code 10506-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559301
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MEYERSON, ADAM, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3714 INGOMAR STREET NW
 City WASHINGTON State DC Zip Code 20015-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PHILANTHROPY ROUNDTABLE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561094
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MICHAL, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 2551
 City SOUTH LAKE TAHOE State CA Zip Code 96158-4051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560512
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MICHAELS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 57
 City ARGYLE State TX Zip Code 76226-0057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOBLE CLASSIC HOMES Occupation (for Individual) HOME BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561239
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. MICHAELS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 57
 City ARGYLE State TX Zip Code 76226-0057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOBLE CLASSIC HOMES Occupation (for Individual) HOME BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561240
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MICHAELS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 57
 City ARGYLE State TX Zip Code 76226-0057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NOBLE CLASSIC HOMES Occupation (for Individual) HOME BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.563043
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MIGNANO, LAURA, I., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12940 FIR DRIVE
 City SONORA State CA Zip Code 95370-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1275.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563167
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

C. MILLER, AUDREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 74 PARK LANE
 City CONCORD State MA Zip Code 01742-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560690
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	875.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MILLER, MATTHEW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2876 SIERRA BERMEJA DR.

City SIERRA VISTA	State AZ	Zip Code 85650-4240
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11A.560629

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. MILLER, MATTHEW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2876 SIERRA BERMEJA DR.

City SIERRA VISTA	State AZ	Zip Code 85650-4240
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.560658

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. MILLER, MATTHEW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2876 SIERRA BERMEJA DR.

City SIERRA VISTA	State AZ	Zip Code 85650-4240
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.563040

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MINNER, DONALD, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11132 STONEBROOK DRIVE
 City MANASSAS State VA Zip Code 20112-3050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559974
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MINNELLA, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12743 TEXANA ST
 City SAN DIEGO State CA Zip Code 92129-3616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AKAMAI TECHNOLOGIES INC. Occupation (for Individual) LEAD PERFORMANCE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560494
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MISANY, THOMAS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5510 PASEO DEL LAGO W APT 2E
 City LAGUNA WOODS State CA Zip Code 92637-2664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563136
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MITCHELL, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16109 W 82ND PL
 City SHAWNEE MISSION State KS Zip Code 66219-1627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 01 / 2018
Transaction ID : SA11A.561839
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. MITCHELL, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16109 W 82ND PL
 City SHAWNEE MISSION State KS Zip Code 66219-1627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562373
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. MITCHELL, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16109 W 82ND PL
 City SHAWNEE MISSION State KS Zip Code 66219-1627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562374
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORGEN, LOWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13171 BOCA DE CANON LN.

City LOS ANGELES	State CA	Zip Code 90049-2220
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11A.561015

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. MORGEN, LOWELL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13171 BOCA DE CANON LN.

City LOS ANGELES	State CA	Zip Code 90049-2220
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562444

Amount of Each Receipt this Period
825.00

Memo Item CONTRIBUTION

C. MORRIS, BROOK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 48 ECHO GLEN

City IRVINE	State CA	Zip Code 92603-0423
----------------	-------------	------------------------

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

Name of Employer (for Individual) PRISM REALTY	Occupation (for Individual) EXECUTIVE
---------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561152

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5925.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MORRIS, BYRON, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 CENTERVILLE ROAD

City BRIDGEWATER	State VA	Zip Code 22812-2701
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.559897

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

B. MORRIS, BYRON, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 CENTERVILLE ROAD

City BRIDGEWATER	State VA	Zip Code 22812-2701
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562293

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

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

Mailing Address 12250 SW 33RD AVENUE

City PORTLAND	State OR	Zip Code 97219-8254
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2018

Transaction ID : SA11A.560413

Amount of Each Receipt this Period
450.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. MUELLER, RICHARD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 432 RIDGEWOOD AVENUE
 City GLEN ELLYN State IL Zip Code 60137-4918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559061
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. MULLOOLY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 628 GOLDEN WEST DRIVE
 City REDLANDS State CA Zip Code 92373-6416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558893
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MUNZER, RUSSELL, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1705 SWEET APPLE CIRCLE
 City ALPHARETTA State GA Zip Code 30004-6670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560723
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MURPHY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 PEACHTREE ST. NW STE 2400
 STE 2400
 City ATLANTA State GA Zip Code 30303-1515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSTANGY BROOKSSMITHPROPHETELLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562706
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. NAGLE, RICHARD, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 PALMER ROAD
 APT 6E
 City BRONXVILLE State NY Zip Code 10708-3504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559921
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. NEUMANN, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 UPLAND RD
 City MEDINA State WA Zip Code 98039-5321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560721
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NEUMANN, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 438 UPLAND RD

City MEDINA	State WA	Zip Code 98039-5321
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.562091

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. NGUYEN, PHUNGANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9215 SANTAYANA DRIVE

City FAIRFAX	State VA	Zip Code 22031-3068
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11A.558585

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

C. NGUYEN, PHUNGANH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9215 SANTAYANA DRIVE

City FAIRFAX	State VA	Zip Code 22031-3068
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : SA11A.560314

Amount of Each Receipt this Period
5.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYANA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018
Transaction ID : SA11A.561768
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYANA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2018
Transaction ID : SA11A.562744
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYANA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562949
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYANA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.563030
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

B. NGUYEN, PHUNGANH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9215 SANTAYANA DRIVE
 City FAIRFAX State VA Zip Code 22031-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.563088
 Amount of Each Receipt this Period
 5.00
 Memo Item
 CONTRIBUTION

C. NICHOLSON, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 N HIDDENBROOKE DRIVE
 City ADVANCE State NC Zip Code 27006-7299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.563015
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. NICHOLS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14954 COLE RD
 City GRASS VALLEY State CA Zip Code 95949-7830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 18 / 2018**
Transaction ID : SA11A.558688
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. NIEDEMAYER, ILSE, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 DUNLOP FARMS BLVD APT 118
 City COLONIAL HEIGHTS State VA Zip Code 23834-1721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 05 / 2018**
Transaction ID : SA11A.562369
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. NORDEEN, DALE, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4206 YUMA DRIVE
 City MADISON State WI Zip Code 53711-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **10 / 23 / 2018**
Transaction ID : SA11A.559102
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. NORDONE, LAURIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 LINCOLN AVE
 City PISCATAWAY State NJ Zip Code 08854-4865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONEBEACON INSURANCE GROUP Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562945
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. O' BRIEN, PATRICIA, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 EAST 86TH STREET APT 20
 City NEW YORK State NY Zip Code 10028-7533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558827
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. O' BRIEN, PATRICIA, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 EAST 86TH STREET APT 20
 City NEW YORK State NY Zip Code 10028-7533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561369
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. O'DONNELL, BRIAN, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8631 EAST ROMA AVENUE
 City SCOTTSDALE State AZ Zip Code 85251-2926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561428
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558680
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558879
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559180
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560622
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560756
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address 9000 ARGONNE STONE

City CONROE	State TX	Zip Code 77302-3438
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt
10 / 28 / 2018
Transaction ID : SA11A.560888

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

Mailing Address 9000 ARGONNE STONE

City CONROE	State TX	Zip Code 77302-3438
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt
10 / 27 / 2018
Transaction ID : SA11A.561003

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

Mailing Address 9000 ARGONNE STONE

City CONROE	State TX	Zip Code 77302-3438
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
570.00

Date of Receipt
10 / 30 / 2018
Transaction ID : SA11A.561137

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2018
Transaction ID : SA11A.561639
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562500
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

C. OBRIEN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 ARGONNE STONE
 City CONROE State TX Zip Code 77302-3438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562859
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

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

Mailing Address W8546 WHITETAIL TRAIL

City HORTONVILLE State WI Zip Code 54944-9321

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562554

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

B. OGREN, JOHN, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1021 COSTA PACIFICA WAY UNIT 2214

City OCEANSIDE State CA Zip Code 92054-2198

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559593

Amount of Each Receipt this Period 525.00

Memo Item CONTRIBUTION

C. OLSEN, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36W720 WILDROSE RD

City SAINT CHARLES State IL Zip Code 60174-1140

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560977

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1025.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, ALAN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 497 ARAPAHOE AVE
 City BOULDER State CO Zip Code 80302-5824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558730
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558870
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558992
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.560118
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

B. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.560309
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11A.560490
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561539
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562023
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. OLSON, LARRY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR.
 City SUSSEX State WI Zip Code 53089-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562899
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Team Ryan

A. OLSON, RAYLIN, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4822 RIVER BLUFF COURT
 City LOVES PARK State IL Zip Code 61111-5836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OLSON ALUMINUM CASTINGS Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2018
Transaction ID : SA11A.559104
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

B. ORCE, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 HEARTHSTONE CIRCLE
 City SCARSDALE State NY Zip Code 10583-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2018
Transaction ID : SA11A.563202
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. OWEN JR., TOFIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8608 WOODLAND HEIGHTS CT
 City ALEXANDRIA State VA Zip Code 22309-2248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018
Transaction ID : SA11A.559552
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. OWEN JR., TOFIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8608 WOODLAND HEIGHTS CT

City ALEXANDRIA	State VA	Zip Code 22309-2248
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11A.559553

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. OWEN JR., TOFIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8608 WOODLAND HEIGHTS CT

City ALEXANDRIA	State VA	Zip Code 22309-2248
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11A.561221

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. OWEN JR., TOFIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8608 WOODLAND HEIGHTS CT

City ALEXANDRIA	State VA	Zip Code 22309-2248
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562712

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PACE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 120 CAMELOT DRIVE
City HARTWELL State GA Zip Code 30643-6466
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) PACE-O-MATIC INC. Occupation (for Individual) EXECUTIVE SCIENTIST
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561633
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PACE, STANLEY, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16561 MERRILL COURT
City CHAGRIN FALLS State OH Zip Code 44023-1159
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561326
Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. PADBERG, HELEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2041 S MADISON ST
City DENVER State CO Zip Code 80210-3610
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561954
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PAGE, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14E14TH STREET

City HOLLAND	State MI	Zip Code 49423-
-----------------	-------------	--------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2018

Transaction ID : SA11A.561761

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. PALACIOS, DONNA, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1623 GARLAND DRIVE

City GOSHEN	State IN	Zip Code 46526-5604
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) EDUCATOR
----------------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2018

Transaction ID : SA11A.561705

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. PANKOW, PAUL, A.H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7840 E LAKE CARLOS DRIVE NE

City CARLOS	State MN	Zip Code 56319-8115
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		05		2018

Transaction ID : SA11A.562340

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PANOS, ANDREW, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 BIRCH ST.
4

City DERRY	State NH	Zip Code 03038-2140
---------------	-------------	------------------------

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

Name of Employer (for Individual) PANOS & PANOS INC.	Occupation (for Individual) OWNER
---------------------------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562719

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

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

Mailing Address 1451 TOLLIS PKWY
APT 246

City BROADVIEW HEIGHTS	State OH	Zip Code 44147-1881
---------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : SA11A.559621

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 2156 WILLOW LAKE DRIVE

City MISHAWAKA	State IN	Zip Code 46545-8918
-------------------	-------------	------------------------

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

Name of Employer (for Individual) DAMPING TECHNOLOGIES INC	Occupation (for Individual) ENGINEER
---------------------------------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2018

Transaction ID : SA11A.559331

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 223 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARIN, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2156 WILLOW LAKE DRIVE
 City MISHAWAKA State IN Zip Code 46545-8918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAMPING TECHNOLOGIES INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **11 / 05 / 2018**
Transaction ID : SA11A.562642
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. PARKS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 LAKEWOOD DR.
 City LEXINGTON State KY Zip Code 40502-2528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2825.00

Date of Receipt **10 / 18 / 2018**
Transaction ID : SA11A.558700
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PARKS, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1226 LAKEWOOD DR.
 City LEXINGTON State KY Zip Code 40502-2528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2825.00

Date of Receipt **10 / 25 / 2018**
Transaction ID : SA11A.560223
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARKS, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1226 LAKEWOOD DR.
City LEXINGTON State KY Zip Code 40502-2528
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2825.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560224
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. PARKS, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1226 LAKEWOOD DR.
City LEXINGTON State KY Zip Code 40502-2528
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2825.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561155
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PARKS, ANN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1226 LAKEWOOD DR.
City LEXINGTON State KY Zip Code 40502-2528
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2825.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562961
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1250.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PARSONS, NELSON, D., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 664 COUNTY ROAD 352

City LA VERNIA	State TX	Zip Code 78121-4021
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2018

Transaction ID : SA11A.560408

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

Mailing Address 6500 PESCADERO CREEK ROAD

City PESCADERO	State CA	Zip Code 94060-9709
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2018

Transaction ID : SA11A.560426

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. PAWLIK, EMIL, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 AVERY CIRCLE

City JACKSON	State MS	Zip Code 39211-2403
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2018

Transaction ID : SA11A.561908

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PECHULS, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1204 S BAYFRONT
 City NEWPORT BEACH State CA Zip Code 92662-1233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559236
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. PERLITZ, LEA, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1499
 City BOERNE State TX Zip Code 78006-1499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559875
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER RD
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KTC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559503
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER RD
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KTC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560173
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER RD
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KTC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561594
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER RD
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KTC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562169
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER RD
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KTC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562516
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

B. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER RD
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KTC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2018
Transaction ID : SA11A.562788
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

C. PERRY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6404 HOSLER RD
 City LEO State IN Zip Code 46765-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KTC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562909
 Amount of Each Receipt this Period
 200.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PESCOSOLIDO, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2521 GOLFSIDE DRIVE
 City NAPLES State FL Zip Code 34110-7001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.561054
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. PETERSON, BRUCE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 928 SO HIGH ST
 City DENVER State CO Zip Code 80209-4551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRUCE PETERSON Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562508
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PEYTON, MURRAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 WOOLSEY CT
 City PENNINGTON State NJ Zip Code 08534-1428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563265
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PIGGOTT, FENTON, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 BELLA VITA COURT, UNIT 2A
UNIT 2A

City WESTMINSTER State MD Zip Code 21157-4485

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 31 / 2018
Transaction ID : SA11A.561390

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. PIGGOTT, FENTON, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 BELLA VITA COURT, UNIT 2A
UNIT 2A

City WESTMINSTER State MD Zip Code 21157-4485

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 13 / 2018
Transaction ID : SA11A.563303

Amount of Each Receipt this Period
20.00

Memo Item CONTRIBUTION

C. PLAYTIS, ANN, S., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 ETON COURT

City WASHINGTON State WV Zip Code 26181-9521

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 01 / 2018
Transaction ID : SA11A.561697

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. POGODZINSKI, ANTHONY, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 MANITOU PK DR.
 City MINOCQUA State WI Zip Code 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.561030
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POINTER, ROY, T., MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 TEXAS STREET
 City PEYTON State TX Zip Code 79070-5848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563275
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POITRAST, NOREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 SOUTH POINTE COURT
 City KINGSPORT State TN Zip Code 37663-2993
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559203
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DR.
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3091.00

Date of Receipt 10 / 20 / 2018
Transaction ID : SA11A.559373
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DR.
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3091.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560693
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POKORNY, GEROLD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E BUENA VISTA DR.
 City TEMPE State AZ Zip Code 85284-2402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3091.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560694
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POKORNY, GEROLD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 E BUENA VISTA DR.

City TEMPE	State AZ	Zip Code 85284-2402
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3091.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561968

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. POKORNY, GEROLD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 E BUENA VISTA DR.

City TEMPE	State AZ	Zip Code 85284-2402
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3091.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561969

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. POLACHEK, DANIEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 335 SOUTH ST P O BOX 234

City NORTHAMPTON	State MA	Zip Code 01061-0234
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DANIEL W POLACHEK P.C.	Occupation (for Individual) CPA CFP
-------------------------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11A.561168

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. POPE, BARBARA, J., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1155 NORTH DEARBOM STREET
 APT 702
 City CHICAGO State IL Zip Code 60610-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559882
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POPP, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 RAMAPOO RD
 City RIDGEFIELD State CT Zip Code 06877-3701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562720
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. POTTER, DENNIS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6412 DAHLONEGA RD
 City BETHESDA State MD Zip Code 20816-2102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KL GATES Occupation (for Individual) GOVERNMENT AFFAIRS ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10200.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560051
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. POWDERLY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 HUNTERDON WAY SOUTHEAST
 City MARIETTA State GA Zip Code 30067-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559774
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. POWDERLY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3246 HUNTERDON WAY SOUTHEAST
 City MARIETTA State GA Zip Code 30067-5002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560074
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. PRATT, HAROLD, I., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 MEMORIAL DR.
 City CAMBRIDGE State MA Zip Code 02138-4859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICHAEL AND PRATT LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563268
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. PRESTON, DAVID, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 BETTY BRUCE ROAD
 City ROSALIA State WA Zip Code 99170-8634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562325
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. PROCTOR, RUSSELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 66TH ST
 City VIRGINIA BEACH State VA Zip Code 23451-2041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562132
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PURCELL, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1800 US ST APT 5
 City SACRAMENTO State CA Zip Code 95818-1653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559640
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 825.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 237 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAFF, GAROLD, D., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16095 SAINT CROIX CIRCLE
 City HUNTINGTON BEACH State CA Zip Code 92649-2047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562055
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. RAFFENSBERGER, VERN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 GLEN ROCK ROAD
 City GLEN ROCK State PA Zip Code 17327-8300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558573
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RAFFENSBERGER, VERN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 GLEN ROCK ROAD
 City GLEN ROCK State PA Zip Code 17327-8300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2018
Transaction ID : SA11A.563215
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RAGSDALE, J. DWIGHT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 HAWKINS ROAD
 City WHITE BLUFF State TN Zip Code 37187-9038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561309
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. RAHJA, VIRGINIA, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 EAST 121ST PLACE SOUTH ROOM 1 APT 106
 City BIXBY State OK Zip Code 74008-5877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559970
 Amount of Each Receipt this Period 65.00
 Memo Item CONTRIBUTION

C. RAHJA, VIRGINIA, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7300 EAST 121ST PLACE SOUTH ROOM 1 APT 106
 City BIXBY State OK Zip Code 74008-5877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 07 / 2018
Transaction ID : SA11A.563214
 Amount of Each Receipt this Period 75.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RANGEL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4790 LEE DRIVE
 City RAPID CITY State SD Zip Code 57702-6996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RM RANGEL INC. Occupation (for Individual) CONSTRUCTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561177
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RAUCH, THOMAS, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14527 COUNTY ROAD 79
 City ELK RIVER State MN Zip Code 55330-9560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559836
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. REID, CLARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 853 THE MASTERS BLVD
 City SHALIMAR State FL Zip Code 32579-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560104
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REID, CLARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 THE MASTERS BLVD

City SHALIMAR	State FL	Zip Code 32579-1665
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561597

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. REID, CLARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 THE MASTERS BLVD

City SHALIMAR	State FL	Zip Code 32579-1665
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11A.562156

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. REID, CLARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 853 THE MASTERS BLVD

City SHALIMAR	State FL	Zip Code 32579-1665
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562487

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RENKERT, DAVID, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3014 SUSSEX ROAD NW
 City CANTON State OH Zip Code 44718-3315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562370
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. REYNOLDS, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 ALVARADO PLACE
 City BERKELEY State CA Zip Code 94705-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558981
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. REYNOLDS, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 ALVARADO PLACE
 City BERKELEY State CA Zip Code 94705-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560557
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. REYNOLDS, CHRISTINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ALVARADO PLACE

City BERKELEY	State CA	Zip Code 94705-1507
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11A.562215

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. REYNOLDS, CHRISTINA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 ALVARADO PLACE

City BERKELEY	State CA	Zip Code 94705-1507
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11A.562216

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RHEIN, PETE, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1407 SOUTH HOLMBY AVE

City LOS ANGELES	State CA	Zip Code 90024-5104
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
----------------------------------------------------	--------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11A.559549

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RHEIN, PETE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1407 SOUTH HOLMBY AVE
 City LOS ANGELES State CA Zip Code 90024-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562846
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. RHEW, FRANK, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 762 COUNTY ROAD 403
 City FLORESVILLE State TX Zip Code 78114-3463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560407
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RICKERSON, MAX, K. , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 431
 City CHANUTE State KS Zip Code 66720-0431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.561677
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIDGE, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 19 SUMMIT AVENUE
City BRONXVILLE State NY Zip Code 10708-2505
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NYP Occupation (for Individual) PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561757
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RIEGER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 631 MCCARTHY DR. N
City HARTFORD State WI Zip Code 53027-9736
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) MARQUETTE UNIVERSITY Occupation (for Individual) ORAL SURGEON
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560503
Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. RIFFERT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8372 SAND CHERRY LANE
City LAUREL State MD Zip Code 20723-1087
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559572
Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. RILEY, RICHARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 SHORECLIFF ROAD
 City CORONA DEL MAR State CA Zip Code 92625-2657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558824
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. RILEY, RUTH, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2909 WOODLAND AVENUE APT. 618 APT 618
 City DES MOINES State IA Zip Code 50312-3873
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559775
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RIMMER, HAROLD, S., SMB, USA RETIRE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 ROYAL DRIVE
 City CONVERSE State TX Zip Code 78109-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563194
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT
 City State Zip Code
 KINGS PARK NY 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018
Transaction ID : SA11A.559051
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT
 City State Zip Code
 KINGS PARK NY 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018
Transaction ID : SA11A.559245
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT
 City State Zip Code
 KINGS PARK NY 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2018
Transaction ID : SA11A.559396
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT
 City KINGS PARK State NY Zip Code 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560686
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT
 City KINGS PARK State NY Zip Code 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561119
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT
 City KINGS PARK State NY Zip Code 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562422
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 248 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT
 City State Zip Code
 KINGS PARK NY 11754-5034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562935
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. RISCICA, KENNETH, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 WINTHROPE ROAD
 City State Zip Code
 MANHASSET NY 11030-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561365
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. ROBERTSON, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 W. COAST HIGHWAY
 223
 City State Zip Code
 NEWPORT BEACH CA 92663-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018
Transaction ID : SA11A.559047
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROBERTS, RICHARD, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1109 SOUTH BAY SHORE DRIVE

City VIRGINIA BEACH State VA Zip Code 23451-3807

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559898

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

B. RODGERS, LOUIS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 CAMPUS DR. UNIT 4423

City CLIVE State IA Zip Code 50325-6630

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559585

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. ROGIER, JAMES, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 FOREST DRIVE

City HUMBOLDT State TN Zip Code 38343-3551

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559939

Amount of Each Receipt this Period 150.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2900.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ROODHOUSE, JAMES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12729 NE 28TH STREET
 City BELLEVUE State WA Zip Code 98005-1701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561494
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE APT. 29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563206
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ROUNDS, CARLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2459 FRANCISCAN DRIVE APT. 29
 City CLEARWATER State FL Zip Code 33763-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563232
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Ryan

A. ROZIC, ITAI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4912 196TH PL
 City FRESH MEADOWS State NY Zip Code 11365-1323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCI Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560060
 Amount of Each Receipt this Period 100.00
 Memo Item
CONTRIBUTION

B. RUDERSHAUSEN, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 CROSSLANDS DRIVE
 City KENNETT SQUARE State PA Zip Code 19348-2028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559976
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. RUDERSHAUSEN, CHARLES, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 CROSSLANDS DRIVE
 City KENNETT SQUARE State PA Zip Code 19348-2028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562290
 Amount of Each Receipt this Period 35.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNBECK, LINDA, C.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 E GOLDEN LAKE RD
 City CIRCLE PINES State MN Zip Code 55014-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE OF MN Occupation (for Individual) STATE LEGISLATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558921
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. RUNDLE, KIRK, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7340 W. 21ST STREET N. SUITE 102
 City WICHITA State KS Zip Code 67205-1770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRK RUNDLE CONSULTING Occupation (for Individual) GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559144
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. RUNDLE, KIRK, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7340 W. 21ST STREET N. SUITE 102
 City WICHITA State KS Zip Code 67205-1770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIRK RUNDLE CONSULTING Occupation (for Individual) GEOPHYSICIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559145
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. RUNDLE, KIRK, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7340 W. 21ST STREET N. SUITE 102

City WICHITA	State KS	Zip Code 67205-1770
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KIRK RUNDLE CONSULTING	Occupation (for Individual) GEOPHYSICIST
-------------------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.560113

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. RUNDLE, KIRK, T., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7340 W. 21ST STREET N. SUITE 102

City WICHITA	State KS	Zip Code 67205-1770
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KIRK RUNDLE CONSULTING	Occupation (for Individual) GEOPHYSICIST
-------------------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562595

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. RUNKLE, JUNE, H., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 376 BLOSSOM VALLEY STREAM

City BUDA	State TX	Zip Code 78610-3582
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562303

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SACHS, MARYSE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 762

City POCASSET	State MA	Zip Code 02559-0762
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.562192

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SACKETT III, DEAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8541 RIVERSIDE ROAD

City ALEXANDRIA	State VA	Zip Code 22308-2206
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE INVESTMENT COMPANY INSTITUTE	Occupation (for Individual) ATTORNEY & LOBBYIST
-----------------------------------------------------------------------	----------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561236

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. SAENZ, GLORIA, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5825 69TH PLACE

City MASPETH	State NY	Zip Code 11378-2625
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

Transaction ID : SA11A.563288

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SANDERS, JOSEPH, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1924 GLENWOOD PARK ROAD

City PRINCETON State WV Zip Code 24739-7969

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 29 / 2018
Transaction ID : SA11A.560480

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

B. SANSOM, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9455 PENSACOLA BOULEVAED SUITE B

City PENSACOLA State FL Zip Code 32534-1237

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN M. SANSOM P.A. Occupation (for Individual) ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 31 / 2018
Transaction ID : SA11A.561505

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. SAROFIM, CHRISTOPHER, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 52830

City HOUSTON State TX Zip Code 77052-2830

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FAYEZ SAROFIM & CO. Occupation (for Individual) VICE CHAIRMAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 29 / 2018
Transaction ID : SA11A.560057

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SAROFIM, COURTNEY, L., MRS.,

Mailing Address **PO BOX 52830**

City HOUSTON	State TX	Zip Code 77052-2830
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
-----------------------------------------------------------	------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 29 / 2018

Transaction ID : SA11A.560059

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCANAVINO, PIERRETTE, , ,

Mailing Address **88 WEST PACES FERRY RD. UNIT 2220**

City ATLANTA	State GA	Zip Code 30305-1447
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 19 / 2018

Transaction ID : SA11A.558863

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SCHEUER, JAMES, C., COL., USAF RET.

Mailing Address **18150 PRAIRIE AVE
221**

City TORRANCE	State CA	Zip Code 90504-3723
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 31 / 2018

Transaction ID : SA11A.561569

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 257 OF 367
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2018

Transaction ID : SA11A.561656

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. SCHEUER, JAMES, C., COL., USAF RET.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18150 PRAIRIE AVE
221

City TORRANCE State CA Zip Code 90504-3723

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : SA11A.563057

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. SCHMID, RICHARD, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11782 LOMA LINDA WAY

City SANTA ANA State CA Zip Code 92705-3033

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2018

Transaction ID : SA11A.563286

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHMIDT JR., THOMAS, J., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6897 STONINGTON ROAD

City CINCINNATI	State OH	Zip Code 45230-3810
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.560031

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. SCHNADIG, J. LAWRENCE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1443 NORTH TIGERTAIL ROAD

City LOS ANGELES	State CA	Zip Code 90049-1428
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
----------------------------------------------------	--------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.559757

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. SCHNEEBECK, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 741 N MANSOTA KEY ROAD

City ENGLEWOOD	State FL	Zip Code 34223-9758
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11A.560360

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCHNUCK, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 LINDEN AVENUE
 City SAINT LOUIS State MO Zip Code 63105-3839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561343
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SCHROEDER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 ECHO DRIVE
 City BURLINGTON State WI Zip Code 53105-1311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559772
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. SCHULMAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 S. OCEAN BOULEVARD 208
 City PALM BEACH State FL Zip Code 33480-5880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560895
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558620
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559521
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560130
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCOTT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 43
 City WINNSBORO State TX Zip Code 75494-0043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.563082
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SEARS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 TENKARA PATH
 City THE WOODLANDS State TX Zip Code 77375-0179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560249
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SEASTRAND, EDWARD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 KESWICK LANE
 City FAIRFIELD GLADE State TN Zip Code 38558-2880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11A.563175
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SELBY, COL EDWIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3820 GULF BLVD PH 7
PH 7

City ST PETE BEACH State FL Zip Code 33706-3948

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563257

Amount of Each Receipt this Period 300.00

Memo Item CONTRIBUTION

B. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT State AZ Zip Code 86301-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560259

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1483 NORTHRIDGE DRIVE

City PRESCOTT State AZ Zip Code 86301-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560610

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 367
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561972
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562140
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SETZER, EDWIN, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1483 NORTHRIDGE DRIVE
 City PRESCOTT State AZ Zip Code 86301-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562820
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.36

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561462
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SHACKLEY, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3408 STREAMSIDE CIR
 City PLEASANTON State CA Zip Code 94588-4173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PACIFIC AUXILIARY FIRE ALARM CO. Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.36

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.563027
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SHANDRI, JULIA, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 559 CAFFERTY ROAD
 City UPPER BLACK EDDY State PA Zip Code 18972-9507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561317
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHANNON, PAT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 423 GUILFORD CIRCLE
 City MARIETTA State GA Zip Code 30068-3028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561533
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. SHEEHAN, PATRICIA, A., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7232 AETNA COURT
 City WAUWATOSA State WI Zip Code 53213-3144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.562315
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. SHINAR, MARGALIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EAST 29TH STREET 22C
 City NEW YORK State NY Zip Code 10016-7493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018
Transaction ID : SA11A.558732
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SHOTWELL, DONNA JEAN, JEAN, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1261 PINE CREEK WAY
 APT B
 City CONCORD State CA Zip Code 94520-3645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt
 11 / 08 / 2018
Transaction ID : SA11A.563260
 Amount of Each Receipt this Period
 30.00
 Memo Item
 CONTRIBUTION

B. SHUPING, FRANCES, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 BAYMOUNT DRIVE
 City SALISBURY State NC Zip Code 28144-9020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 30 / 2018
Transaction ID : SA11A.561222
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SILLS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 COCOANUT ROW
 R1
 City PALM BEACH State FL Zip Code 33480-4069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 10 / 23 / 2018
Transaction ID : SA11A.559507
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SILLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 COCOANUT ROW
R1

City PALM BEACH State FL Zip Code 33480-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559508

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

B. SILLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 COCOANUT ROW
R1

City PALM BEACH State FL Zip Code 33480-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560780

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

C. SILLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 COCOANUT ROW
R1

City PALM BEACH State FL Zip Code 33480-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561867

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SILLS, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44 COCOANUT ROW
R1

City PALM BEACH State FL Zip Code 33480-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EDUCATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
11 / 05 / 2018
Transaction ID : SA11A.562608

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. SIMON, DONALD, R., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6318 RAMWYCK COURT

City WEST BLOOMFIELD State MI Zip Code 48322-2251

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
10 / 25 / 2018
Transaction ID : SA11A.559859

Amount of Each Receipt this Period
275.00

Memo Item
CONTRIBUTION

C. SIMPSON, HAROLD, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8515 COSTA VERDE BOULEVARD, UNIT 1
UNIT 1557

City SAN DIEGO State CA Zip Code 92122-6685

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt
10 / 30 / 2018
Transaction ID : SA11A.561071

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 675.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SIMPSON, RUTH, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103A W CRANE STREET
 City NORTON State KS Zip Code 67654-1115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 13 / 2018
Transaction ID : SA11A.563312
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SKANSE, CAROL, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5200 FRANCE AVENUE SOUTH #18 #18
 City EDINA State MN Zip Code 55410-2065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 07 / 2018
Transaction ID : SA11A.563220
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SLEY, RONALD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8734 CYPRESS CLUB DR.
 City RALEIGH State NC Zip Code 27615-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559569
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMALLWOOD, CHARLES, , DR., JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 SCOTCH DAM ROAD

City SOUTH EASTON	State MA	Zip Code 02375-1014
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2018

Transaction ID : SA11A.563162

Amount of Each Receipt this Period
35.00

Memo Item
CONTRIBUTION

B. SMALL, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 301 BROOKSBY VILALGE DRIVE
UNIT 618

City PEABODY	State MA	Zip Code 01960-8553
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
-----------------------------------------------------------------------------	-------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2018

Transaction ID : SA11A.560358

Amount of Each Receipt this Period
225.00

Memo Item
CONTRIBUTION

C. SMEAD, LARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2857 ESSEX RD P.O. BOX 37

City ESSEX	State NY	Zip Code 12936-0037
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SASCO	Occupation (for Individual) CEO
--------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2018

Transaction ID : SA11A.560758

Amount of Each Receipt this Period
20000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	20260.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SMITH, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 QUEEN ST
 City GORHAM State ME Zip Code 04038-2633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560719
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SMITH, PAZ, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4310 BETHEL ROAD SE
 City PORT ORCHARD State WA Zip Code 98366-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561070
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. SNEED, ALBERT, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 334 RACQUET CLUB RD.
 City ASHEVILLE State NC Zip Code 28803-3133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VANWINKLE LAW FIRM Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559231
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SODERBERG, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 PINE RIDGE COURT
 City NEW RICHMOND State WI Zip Code 54017-2243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 1ST NATIONAL BANK Occupation (for Individual) BANKING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562336
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. SOKOL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 EMERALD BAY
 City LAGUNA BEACH State CA Zip Code 92651-1254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562618
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. SOLA, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CANTERBURY ROAD
 City GLEN HEAD State NY Zip Code 11545-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTIN CLEARWATER & BELL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560176
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SOLA, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 CANTERBURY ROAD
 City GLEN HEAD State NY Zip Code 11545-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTIN CLEARWATER & BELL Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560177
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. SORENSON, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6440 S WASATCH BLVD. SUITE 105
 City SALT LAKE CITY State UT Zip Code 84121-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14000.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558721
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SORENSON, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6440 S WASATCH BLVD. SUITE 105
 City SALT LAKE CITY State UT Zip Code 84121-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14000.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.558722
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SORENSON, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6440 S WASATCH BLVD.
 SUITE 105
 City SALT LAKE CITY State UT Zip Code 84121-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14000.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560675
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. SORENSON, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6440 S WASATCH BLVD.
 SUITE 105
 City SALT LAKE CITY State UT Zip Code 84121-3559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14000.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560676
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. SOUTHALL, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 CARMEL LANE
 City GROSSE POINTE FARM State MI Zip Code 48236-3720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558923
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SPITLERS, KENNETH, , ,			Date of Receipt
Mailing Address 9502 BAYOU BROOK ST			<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2018"/>
City HOUSTON	State TX	Zip Code 77063-1058	Transaction ID : SA11A.558625
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SPRAKER, TERRY, , MR.,			Date of Receipt
Mailing Address 7136 ECHO RIDGE DR.			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2018"/>
City SAN JOSE	State CA	Zip Code 95120-4718	Transaction ID : SA11A.559668
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SPURGIN, ROBERT, , ,			Date of Receipt
Mailing Address 5466 NORTHBROOK			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2018"/>
City DALLAS	State TX	Zip Code 75220-2256	Transaction ID : SA11A.560230
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer (for Individual) SPURGIN INSURANCE		Occupation (for Individual) AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.559663

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.560216

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. STAAB, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6655 BOTTLEBRUSH LN

City NAPLES	State FL	Zip Code 34109-3813
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2018

Transaction ID : SA11A.560880

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STANLEY, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4900 STROHM AVE
 City NORTH HOLLYWOOD State CA Zip Code 91601-4842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PTS LLC Occupation (for Individual) TRUCKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561644
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

B. STAR, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19045 W THOMSON DRIVE UNIT I204
 City BROOKFIELD State WI Zip Code 53045-5174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559098
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

C. STARK, ROBERT, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 MARWOOD RD APT 3308
 City CABOT State PA Zip Code 16023-2250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.563246
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1050.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.559686
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560248
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560611
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560981
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561201
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. STAROSTOVIC, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2620 MARILYN DR.
 City STOUGHTON State WI Zip Code 53589-4147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562962
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STARR, RAE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1848 20TH STREET B
 City SANTA MONICA State CA Zip Code 90404-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCAL INITIATIVE HEALTH AUTHORITY Occupation (for Individual) ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.99

Date of Receipt 10 / 21 / 2018
Transaction ID : SA11A.559306
 Amount of Each Receipt this Period 99.99
 Memo Item
 CONTRIBUTION

B. STARR, SAMUEL, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 N CHERRY STREET
 City FALLS CHURCH State VA Zip Code 22046-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560039
 Amount of Each Receipt this Period 350.00
 Memo Item
 CONTRIBUTION

C. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.559025
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	499.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.561039
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STASHIK, DAVID, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 EDITH STREET
 City BERKELEY State CA Zip Code 94703-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) COACH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.563017
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. STEELE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1926 ELECTRIC AVE
 City BELLINGHAM State WA Zip Code 98229-4517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559197
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEELE, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1926 ELECTRIC AVE
 City BELLINGHAM State WA Zip Code 98229-4517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562616
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STEIDEL, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10040 E. HAPPY VALLEY RD 229
 City SCOTTSDALE State AZ Zip Code 85255-2370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560865
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. STEPHENS, NORVAL, B., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1357 W ISLAND CLUB SQUARE
 City VERO BEACH State FL Zip Code 32963-5518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561446
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEPHENS, RICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 307 E AVE E

City ALPINE	State TX	Zip Code 79830-4729
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561502

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. STEVENS, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2836 NE 23RD AVENUE

City POMPANO BEACH	State FL	Zip Code 33064-8234
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ARBOR RESEARCH TRADING LLC	Occupation (for Individual) CEO
-----------------------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558951

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. STEVENS, MARC, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 691

City ELKIN	State NC	Zip Code 28621-0691
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HCMH	Occupation (for Individual) SURGEON
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2018

Transaction ID : SA11A.559255

Amount of Each Receipt this Period
20.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	770.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 691
 City ELKIN State NC Zip Code 28621-0691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCMH Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.560278
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

B. STEVENS, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 691
 City ELKIN State NC Zip Code 28621-0691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCMH Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560621
 Amount of Each Receipt this Period 50.00
 Memo Item
CONTRIBUTION

C. STEVENS, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 691
 City ELKIN State NC Zip Code 28621-0691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCMH Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561919
 Amount of Each Receipt this Period 30.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STEVENS, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 691
 City ELKIN State NC Zip Code 28621-0691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCMH Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562469
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

B. STEVENS, MARC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 691
 City ELKIN State NC Zip Code 28621-0691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HCMH Occupation (for Individual) SURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562470
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

C. STONE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 S. OCEAN BLVD 901
 City HIGHLAND BEACH State FL Zip Code 33487-1876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 22 / 2018
Transaction ID : SA11A.559149
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 286 OF 367
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. STONE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 S. OCEAN BLVD
 901
 City HIGHLAND BEACH State FL Zip Code 33487-1876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.559652
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. STONE, ERIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2917 S. OCEAN BLVD
 901
 City HIGHLAND BEACH State FL Zip Code 33487-1876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.559653
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. STOVER, HAYS, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 WOODLAND ROAD
 City SEWICKLEY State PA Zip Code 15143-1050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) K & L GALES LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561306
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 287 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. STRICKLIN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 231 E DUNOON PLACE
 City SHELTON State WA Zip Code 98584-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562695
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. STUMBAUGH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RUFFIAN RD.
 City AIKEN State SC Zip Code 29803-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.559018
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. STUMBAUGH, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 RUFFIAN RD.
 City AIKEN State SC Zip Code 29803-5660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562665
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560642
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SUBKO, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1203 BLUEGRASS LANE
 City SHENANDOAH State IA Zip Code 51601-2511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562130
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. SUMNER, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8116 E HARVARD CR
 City DENVER State CO Zip Code 80231-7619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUMNER VISION Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.559217
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SURLAS, ROBERTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 10TH STREET
 City MONROE State WI Zip Code 53566-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018
Transaction ID : SA11A.561902
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. SUTHERLAND, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 PULLIAM AVE
 City WORLAND State WY Zip Code 82401-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.559660
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2018
Transaction ID : SA11A.560823
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11A.561266

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11A.561274

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561626

Amount of Each Receipt this Period
30.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562459
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 11 / 03 / 2018
Transaction ID : SA11A.562860
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

C. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 11 / 03 / 2018
Transaction ID : SA11A.562861
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SWEENEY, KATHLEEN, M., MISS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 879 N LEXINGTON STREET

City ARLINGTON	State VA	Zip Code 22205-1332
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11A.558828

Amount of Each Receipt this Period
300.00

Memo Item
CONTRIBUTION

B. SWIGERT, HENRY, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1425 SW 20TH AVENUE, STE 104
SUITE 104

City PORTLAND	State OR	Zip Code 97201-2485
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11A.561075

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. TALBOT, RICHARD, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65 BERKELEY ST

City PORTLAND	State ME	Zip Code 04103-3137
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11A.562126

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TALBOTT, WARREN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 N WILLOW STREET
 City DAYTON State WA Zip Code 99328-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TALBOTT INN Occupation (for Individual) FARM MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 11 / 06 / 2018
Transaction ID : SA11A.563147
 Amount of Each Receipt this Period 30.00
 Memo Item
 CONTRIBUTION

B. TALLANT, DAVID, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4630 CAIRO DRIVE NE
 City ALBUQUERQUE State NM Zip Code 87111-2616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 10 / 24 / 2018
Transaction ID : SA11A.559605
 Amount of Each Receipt this Period 200.00
 Memo Item
 CONTRIBUTION

C. TALLANT, DAVID, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4630 CAIRO DRIVE NE
 City ALBUQUERQUE State NM Zip Code 87111-2616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 11 / 05 / 2018
Transaction ID : SA11A.562338
 Amount of Each Receipt this Period 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAMAYO, MARITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2424 W TAMPA BAY BLVD
 M302
 City TAMPA State FL Zip Code 33607-1337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2018
Transaction ID : SA11A.559481
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. TAMAYO, MARITZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2424 W TAMPA BAY BLVD
 M302
 City TAMPA State FL Zip Code 33607-1337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2018
Transaction ID : SA11A.559482
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. TARAFDER, ABU, Y., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 48 CLARKE STREET
 City BRENTWOOD State NY Zip Code 11717-2024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LNK INTERNATIONAL, INC Occupation (for Individual) SUPERVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.559956
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 295 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TARIZZO, MARILYN, , MRS.,

Mailing Address 3109 TWIN OAKS DR.

City JOLIET	State IL	Zip Code 60435-4744
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11A.563248

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TAWNEY, DONALD, , ,

Mailing Address 111 WADDELL ST. SE

City MARIETTA	State GA	Zip Code 30060-1962
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : SA11A.560965

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TAYLOR, CHRISTOPHER, , ,

Mailing Address 313 SADDLE RIDGE DR.

City KNOXVILLE	State TN	Zip Code 37934-7405
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
----------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2018

Transaction ID : SA11A.559138

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 296 OF 367
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TAYLOR, THOMAS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2424 MOUNT VERNON AVENUE

City JANESVILLE	State WI	Zip Code 53545-2228
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11A.559799

Amount of Each Receipt this Period
300.00

Memo Item CONTRIBUTION

B. TEDDER, VIRGIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3075 HOWELL MILL ROAD UNIT 4

City ATLANTA	State GA	Zip Code 30327-1657
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.560308

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

C. TEDDER, VIRGIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3075 HOWELL MILL ROAD UNIT 4

City ATLANTA	State GA	Zip Code 30327-1657
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
332.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11A.560310

Amount of Each Receipt this Period
257.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	582.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TEDDER, VIRGIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3075 HOWELL MILL ROAD UNIT 4

City ATLANTA	State GA	Zip Code 30327-1657
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.00

Date of Receipt
11 / 05 / 2018
Transaction ID : SA11A.562453

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

B. THALER, ARNOLD, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1281 GULF OF MEXICO DRIVE UNIT 106

City LONGBOAT KEY	State FL	Zip Code 34228-4630
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
-----------------------------------------------------------------------------	-------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 06 / 2018
Transaction ID : SA11A.563133

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

C. THOMAS, BEULAH, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1735 QUARTZ LANE

City LAKE HAVASU CITY	State AZ	Zip Code 86403-5623
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
-----------------------------------------------------------------------------	-------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
501.00

Date of Receipt
11 / 05 / 2018
Transaction ID : SA11A.562295

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 298 OF 367
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMAS, NORMAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 766 W NORTH LINKS DR.

City WASHINGTON	State UT	Zip Code 84780-8522
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561600

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. THOMAS, NORMAN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 766 W NORTH LINKS DR.

City WASHINGTON	State UT	Zip Code 84780-8522
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.563039

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. THOMPSON, GARY, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19874 FESTIVAL LOOP

City PRINCETON	State MO	Zip Code 64673-9827
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2018

Transaction ID : SA11A.560868

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 299 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. THOMPSON, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 SW 8 ST
 City ROCHESTER State MN Zip Code 55902-2062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561464
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. TIMBERS, VIOLA, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 5TH AVENUE APT 16P
 City NEW YORK State NY Zip Code 10037-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559938
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. TOENJES, WAYNE, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 FLINTS ROAD
 City WAUSAU State WI Zip Code 54401-9049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAJOR INDUSTRIES Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561942
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 300 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TOMSKI, JEFFREY, , ,

Mailing Address 4674 CR 120

City MILLERSBURG	State OH	Zip Code 44654-9280
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) T H MFG. INC.	Occupation (for Individual) PRESIDENT
----------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11A.561252

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TOP, JR., FRANKLIN, H., , JR

Mailing Address 3000 GALLOWAY RIDGE
APT J311

City PITTSBORO	State NC	Zip Code 27312-5522
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11A.559060

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TORING, WAYNE, , ,

Mailing Address P.O. BOX 36

City SISSETON	State SD	Zip Code 57262-0036
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : SA11A.559740

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRAHAN, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5505 JUDALON LN.
 City HOUSTON State TX Zip Code 77056-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STARR COMPANIES Occupation (for Individual) INSURANCE UNDERWRITING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560720
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. TRENT, CARLA, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 CHESTNUT HILL COURT APT 16
 City THOUSAND OAKS State CA Zip Code 91360-3893
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559873
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. TROTTER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 CAMPUS BLVD
 City NEWTOWN SQUARE State PA Zip Code 19073-3229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CFG Occupation (for Individual) INSURANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11A.560985
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 302 OF 367
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TROTTER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 CAMPUS BLVD

City NEWTOWN SQUARE	State PA	Zip Code 19073-3229
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CFG	Occupation (for Individual) INSURANCE
------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : SA11A.560986

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. TROTTER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 CAMPUS BLVD

City NEWTOWN SQUARE	State PA	Zip Code 19073-3229
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CFG	Occupation (for Individual) INSURANCE
------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2018

Transaction ID : SA11A.562963

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. TROTTER, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 CAMPUS BLVD

City NEWTOWN SQUARE	State PA	Zip Code 19073-3229
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CFG	Occupation (for Individual) INSURANCE
------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2018

Transaction ID : SA11A.562964

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TRUMP, PAUL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 3RD AVENUE SOUTH
 UNIT 2402
 City MINNEAPOLIS State MN Zip Code 55401-2720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.560030
 Amount of Each Receipt this Period
 1000.00
 Memo Item CONTRIBUTION

B. TURNER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909. CITATION
 City MIDLAND State TX Zip Code 79705-1806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SF Occupation (for Individual) M.D.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2018
Transaction ID : SA11A.559419
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

C. UPTON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 ALBEMARLE RD
 City NORWOOD State MA Zip Code 02062-1102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561465
 Amount of Each Receipt this Period
 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. UPTON, WARREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 ADAIR WAY

City SAN JOSE	State CA	Zip Code 95124-5341
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561226

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. UPTON, WARREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 ADAIR WAY

City SAN JOSE	State CA	Zip Code 95124-5341
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562654

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. UTLEY, FRANK, H., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24218 223RD PLACE SE

City MAPLE VALLEY	State WA	Zip Code 98038-7919
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
214.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : SA11A.560405

Amount of Each Receipt this Period
57.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	157.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VALLAR, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1530 LONDON ROAD
 City CHARLOTTEVILLE State VA Zip Code 22901-8880
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUARD HILL ADVISORS Occupation (for Individual) INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1325.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562542
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. VAUGHAN, BETTY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10102 WESTLEIGH DR.
 City HUNTSVILLE State AL Zip Code 35803-1647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561231
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. VAUGHAN, BETTY, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10102 WESTLEIGH DR.
 City HUNTSVILLE State AL Zip Code 35803-1647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562671
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VAZQUEZ-RODRIGUEZ, ISABELINO, , ,

Mailing Address **4100 SE 89TH TERRACE**

City OKLAHOMA CITY	State OK	Zip Code 73135-6348
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562288

Amount of Each Receipt this Period

150.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VEHR, JOHN, , ,

Mailing Address **6574 EAST KNOLLWOOD CIRCLE**

City LOVELAND	State OH	Zip Code 45140-9157
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11A.558670

Amount of Each Receipt this Period

250.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VEHR, JOHN, , ,

Mailing Address **6574 EAST KNOLLWOOD CIRCLE**

City LOVELAND	State OH	Zip Code 45140-9157
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11A.558671

Amount of Each Receipt this Period

250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City ORLANDO State FL Zip Code 32801-1695

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt
10 / 22 / 2018
Transaction ID : SA11A.559249

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City ORLANDO State FL Zip Code 32801-1695

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt
10 / 24 / 2018
Transaction ID : SA11A.559724

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VENNUM, PAULINE, , ,

Mailing Address 150 E ROBINSON ST.
2201

City ORLANDO State FL Zip Code 32801-1695

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
755.00

Date of Receipt
10 / 27 / 2018
Transaction ID : SA11A.560988

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. VENNUM, PAULINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 E ROBINSON ST.
 2201
 City ORLANDO State FL Zip Code 32801-1695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11A.561607
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. VENNUM, PAULINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 E ROBINSON ST.
 2201
 City ORLANDO State FL Zip Code 32801-1695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018
Transaction ID : SA11A.561932
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

C. VENNUM, PAULINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 E ROBINSON ST.
 2201
 City ORLANDO State FL Zip Code 32801-1695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2018
Transaction ID : SA11A.562817
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 309 OF 367
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. VENNUM, PAULINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 E ROBINSON ST.
 2201
 City ORLANDO State FL Zip Code 32801-1695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562901
 Amount of Each Receipt this Period
 50.00
 Memo Item
 CONTRIBUTION

B. VENNUM, PAULINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 E ROBINSON ST.
 2201
 City ORLANDO State FL Zip Code 32801-1695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562966
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. VOGEL, CLAUDETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2922 COMISTAS DRIVE
 City WALNUT CREEK State CA Zip Code 94598-4554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA11A.559718
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VOGEL, CLAUDETTE, , ,

Mailing Address **2922 COMISTAS DRIVE**

City WALNUT CREEK	State CA	Zip Code 94598-4554
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 24 / 2018

Transaction ID : SA11A.559719

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VOGEL, CLAUDETTE, , ,

Mailing Address **2922 COMISTAS DRIVE**

City WALNUT CREEK	State CA	Zip Code 94598-4554
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
11 / 02 / 2018

Transaction ID : SA11A.562102

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VOGEL, CLAUDETTE, , ,

Mailing Address **2922 COMISTAS DRIVE**

City WALNUT CREEK	State CA	Zip Code 94598-4554
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.00

Date of Receipt
11 / 02 / 2018

Transaction ID : SA11A.562103

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WAGES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 PINECONE LANE

City SOUTHBOROUGH	State MA	Zip Code 01772-1244
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOC WAGES LLC	Occupation (for Individual) PHYSICIAN
----------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561550

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. WAGES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31 PINECONE LANE

City SOUTHBOROUGH	State MA	Zip Code 01772-1244
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DOC WAGES LLC	Occupation (for Individual) PHYSICIAN
----------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11A.561551

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. WAHL DICK, ROGER, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10643 CAVALLO RIDGE

City EDEN PRAIRIE	State MN	Zip Code 55347-2200
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) REAL ESTATE
----------------------------------------------------	--------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11A.562054

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WAITE, BETTY, H., MS.,

Mailing Address 12 PLEASANT ST

City BURLINGTON	State MA	Zip Code 01803-2727
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018

Transaction ID : SA11A.559891

Amount of Each Receipt this Period
40.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WAITE, BETTY, H., MS.,

Mailing Address 12 PLEASANT ST

City BURLINGTON	State MA	Zip Code 01803-2727
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2018

Transaction ID : SA11A.563252

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WALDMAN M.D., ALAN, , ,

Mailing Address 10046 SW 44TH LANE

City GAINESVILLE	State FL	Zip Code 32608-7134
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PHYSICIAN
----------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018

Transaction ID : SA11A.559190

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WALKER, FRANCES, ANN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5920 NORTH CAMINO PADRE ISIDORO
 City TUCSON State AZ Zip Code 85718-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 22 / 2018**
Transaction ID : SA11A.559066
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WANG, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1892 ERLANGER DR.
 City BATON ROUGE State LA Zip Code 70816-8677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **11 / 05 / 2018**
Transaction ID : SA11A.562372
 Amount of Each Receipt this Period - 125.00
 Memo Item CONTRIBUTION
 CHARGED BACK

C. WARD, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 304 ROSCOMMON DR.
 City BRISTOL State TN Zip Code 37620-3048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 01 / 2018**
Transaction ID : SA11A.561816
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WARD, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2795 AQUA COURT
 City PUNTA GORDA State FL Zip Code 33950-5022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560466
 Amount of Each Receipt this Period 40.00
 Memo Item CONTRIBUTION

B. WARREN, WOODROW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7808 E. GALVESTON ST.
 City BROKEN ARROW State OK Zip Code 74014-7060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562717
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WASON, WILLIAM, , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1657 METROPOLITAN DRIVE
 City LONGMONT State CO Zip Code 80504-1708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561307
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	390.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 315 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WATTS, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1464 ROCKRIDGE RD
 City JARRETTSVILLE State MD Zip Code 21084-1302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEL AIR CONSTRUCTION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561664
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. WEBER, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 WEST 7TH STREET
 City SIOUX FALLS State SD Zip Code 57104-2837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559822
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WEIDENFELLER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 VZ CR 2915
 City EUSTACE State TX Zip Code 75124-7224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KIMS CONVENIENCE STORES 24 Occupation (for Individual) DELI COOK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561243
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WEIDENFELLER, JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2018
Mailing Address 500 VZ CR 2915		Transaction ID : SA11A.561244
City EUSTACE	State TX	Zip Code 75124-7224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) KIMS CONVENIENCE STORES 24	Occupation (for Individual) DELI COOK	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WEIDENFELLER, JOHN, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2018
Mailing Address 500 VZ CR 2915		Transaction ID : SA11A.561245
City EUSTACE	State TX	Zip Code 75124-7224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) KIMS CONVENIENCE STORES 24	Occupation (for Individual) DELI COOK	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WEISS, DAVID, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2018
Mailing Address 10111 CANYONRIDGE PLACE		Transaction ID : SA11A.559000
City SPRING VALLEY	State CA	Zip Code 91977-6915
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10111 CANYONRIDGE PLACE

City SPRING VALLEY	State CA	Zip Code 91977-6915
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11A.561006

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WEISS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10111 CANYONRIDGE PLACE

City SPRING VALLEY	State CA	Zip Code 91977-6915
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11A.561845

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WEISS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10111 CANYONRIDGE PLACE

City SPRING VALLEY	State CA	Zip Code 91977-6915
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.562144

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10111 CANYONRIDGE PLACE

City SPRING VALLEY	State CA	Zip Code 91977-6915
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2018

Transaction ID : SA11A.562826

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WEISS, NITZA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 540 BARDINI DRIVE

City MELVILLE	State NY	Zip Code 11747-5326
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561663

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WEISS, NITZA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 540 BARDINI DRIVE

City MELVILLE	State NY	Zip Code 11747-5326
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562604

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 319 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WEISS, NITZA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 540 BARDINI DRIVE

City MELVILLE	State NY	Zip Code 11747-5326
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.563012

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

B. WELSH, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 COX ROAD

City NEWARK	State DE	Zip Code 19711-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : SA11A.558822

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

C. WILHELM, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 TAHANTO TRAIL

City HARVARD	State MA	Zip Code 01451-1629
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561191

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 320 OF 367
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILHELM, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 TAHANTO TRAIL

City HARVARD	State MA	Zip Code 01451-1629
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562659

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. WILKINS, HARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 CHISHOLM PLACE STE 208

City PLANO	State TX	Zip Code 75075-6908
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DIVERSIFIED INS MGMT	Occupation (for Individual) INSURANCE
-----------------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11A.561265

Amount of Each Receipt this Period
350.00

Memo Item CONTRIBUTION

C. WILLE, BOB, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 843 BERRYHILL CIRCLE

City FRUITLAND PARK	State FL	Zip Code 34731-5287
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11A.558581

Amount of Each Receipt this Period
- 250.00

Memo Item CONTRIBUTION

CHARGED BACK

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILLIAMS, BARBARA, J., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1206 S RIVER RD

City JANESVILLE	State WI	Zip Code 53546-5452
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : SA11A.559630

Amount of Each Receipt this Period
2000.00

Memo Item CONTRIBUTION

B. WILLIAMS, EMMA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2601 WEST 82ND STREET

City INGLEWOOD	State CA	Zip Code 90305-1428
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
-----------------------------------------------------------------------------	-------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11A.562627

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

C. WILLIS, LLOY, T., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12039 STONE CROSSING CIRCLE

City TAMPA	State FL	Zip Code 33635-6228
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11A.561837

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2275.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WILSON, RANSOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 PARK AVENUE
 12C
 City NEW YORK State NY Zip Code 10028-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2018
Transaction ID : SA11A.562947
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

B. WINTER, KATHERINE, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 HUNTINGTON AVENUE
 APT 303
 City BOSTON State MA Zip Code 02116-5760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11A.559996
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. WINWARD, ANNETTE, K. , MRS. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4991
 City POCATELLO State ID Zip Code 83205-4991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.561687
 Amount of Each Receipt this Period
 600.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOLANSKY, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12910 OLEANDER RD
 City MIAMI State FL Zip Code 33181-2356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMG Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561122
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

B. WOLFF, WILLIAM, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16023 AVENIDA LAMEGO
 City SAN DIEGO State CA Zip Code 92128-3151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561381
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. WOLL M.D., DOUGLAS, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3311 WOODVIEW LAKE ROAD
 City WEST BLOOMFIELD State MI Zip Code 48323-3573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560000
 Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODFORD, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 90 HEARTHSTONE RD
City PINEHURST State NC Zip Code 28374-7093
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ECONOMIC CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2018
Transaction ID : SA11A.562812
Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

B. WOODHOUSE, MARILYN, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 650 RAMBLEWOOD RD.
City HOUSTON State TX Zip Code 77079-6905
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.561833
Amount of Each Receipt this Period 250.00
 Memo Item
CONTRIBUTION

C. WOODROW, KEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10460 EAST PALO DRIVE
City SCOTTSDALE State AZ Zip Code 85262-
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.560684
Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WOODS, KAY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3570 JACKSON STREET
 City SAN FRANCISCO State CA Zip Code 94118-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559922
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. WOODS, KAY, H., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3570 JACKSON STREET
 City SAN FRANCISCO State CA Zip Code 94118-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560054
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. WOOLF, JOHN, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4431 NORTH WILSON AVENUE
 City FRESNO State CA Zip Code 93704-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561378
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.560882
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.561050
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.561593
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.561668
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.562185
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.562501
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562831
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WRIGHT, BROOKS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND PARK PLACE
 City MAMARONECK State NY Zip Code 10580-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARINE INDUSTRIAL HYDRAULICS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11A.562868
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. WRIGHT, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 LAKESIDE WAY
 City PALM COAST State FL Zip Code 32137-1636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11A.559530
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WRIGHT, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 LAKESIDE WAY

City PALM COAST	State FL	Zip Code 32137-1636
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2018

Transaction ID : SA11A.560841

Amount of Each Receipt this Period
30.00

Memo Item CONTRIBUTION

B. WRIGHT, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 LAKESIDE WAY

City PALM COAST	State FL	Zip Code 32137-1636
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11A.562083

Amount of Each Receipt this Period
50.00

Memo Item CONTRIBUTION

C. WRIGHT, KATHLEEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 LAKESIDE WAY

City PALM COAST	State FL	Zip Code 32137-1636
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11A.562491

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Team Ryan

A. WUESTHOFF, WILLIAM, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10737 NORTH ESSEX COURT
 City MEQUON State WI Zip Code 53092-8531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.559806
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WULFF, ROBERT, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 SHAWMUT AVENUE APT 2
 City BOSTON State MA Zip Code 02118-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.558969
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. Y SOO, LIANG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 FRIDAY LANE
 City CHAPEL HILL State NC Zip Code 27514-3231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 13 / 2018
Transaction ID : SA11A.563327
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 331 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YANTZER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 REMONT CIRCLE
 City OAK PARK State CA Zip Code 91377-4739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.562159
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. YATES, ROBERT, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 128 VIA HAVRE
 City NEWPORT BEACH State CA Zip Code 92663-4905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2018
Transaction ID : SA11A.560411
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. YIP, CHING, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6934 LONGFELLOW COURT
 City SAN JOSE State CA Zip Code 95129-3766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KAISER FOUNDATION HOSPITAL Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2018
Transaction ID : SA11A.559305
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 OF 367
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Team Ryan

A. YOUNG, ROBERT, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 S OLIVE ST #1217

City WEST PALM BEACH	State FL	Zip Code 33401-6510
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) VENTURE CAPITAL
----------------------------------------------------	------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11A.558571

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. YOUNG, SARA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 LAKEVIEW DRIVE
APT 106A

City PARKERSBURG	State WV	Zip Code 26104-1640
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2018

Transaction ID : SA11A.560421

Amount of Each Receipt this Period
120.00

Memo Item
CONTRIBUTION

C. YOUNG, THOMAS, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8967 BLOOMFIELD BLVD

City SARASOTA	State FL	Zip Code 34238-4452
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
-------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
612.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11A.562110

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1370.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZANZE, ANTHONY, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 GRAHAM STREET
 STE 200B
 City SAN FRANCISCO State CA Zip Code 94129-1724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.560377
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. ZEMBRZUSKI, AUDRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2842 SHADYWOOD DR.
 NONE
 City TROY State MI Zip Code 48098-4128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 647.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.560307
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZEMBRZUSKI, AUDRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2842 SHADYWOOD DR.
 NONE
 City TROY State MI Zip Code 48098-4128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 647.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.560727
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 OF 367
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ZEMBRZUSKI, AUDRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2842 SHADYWOOD DR.
 NONE
 City TROY State MI Zip Code 48098-4128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 647.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.562160
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

B. ZUSKIN, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2775 SHELL ROAD
 City GOUCESTER State VA Zip Code 23061-3159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2018
Transaction ID : SA11A.563184
 Amount of Each Receipt this Period
 25.00
 Memo Item
 CONTRIBUTION

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	629586.99

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 335 OF 367
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. AMERICAN SUNTANNING ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 1907

City JACKSON	State MI	Zip Code 49204-1907
FEC ID number of contributing federal political committee. C C00563015		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
11 / 02 / 2018
Transaction ID : SA11C.561678

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. FORD MOTOR COMPANY CIVIC ACTION FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address THE AMERICAN ROAD

City DEARBORN	State MI	Zip Code 48121-
FEC ID number of contributing federal political committee. C C00046474		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
11 / 06 / 2018
Transaction ID : SA11C.563274

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. UPSPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 55 GLENLAKE PKWY

City ATLANTA	State GA	Zip Code 30328-3474
FEC ID number of contributing federal political committee. C C00064766		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt
11 / 29 / 2018
Transaction ID : SA11C.560052

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	12500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 336 OF 367
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

A. NRCC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 320 FIRST STREET SE
City WASHINGTON State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00002931
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 353074.38

Date of Receipt 11 / 15 / 2018
Transaction ID : SA12.26919
Amount of Each Receipt this Period 49399.62
 Memo Item
XFER FOR JFC EXPENSES (NRCC LEGAL FUND)

B.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	49399.62
TOTAL This Period (last page this line number only).....	49399.62

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 337 OF 367
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SPRINT		Date of Receipt
Mailing Address PO BOX 4191		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2018"/>
City CAROL STREAM	State IL	Zip Code 60197
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.26805
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item REVERSAL OF FRAUDULENT CHARGE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SPRINT		Date of Receipt
Mailing Address PO BOX 4191		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2018"/>
City CAROL STREAM	State IL	Zip Code 60197
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.26806
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item REVERSAL OF FRAUDULENT CHARGE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SUNTRUST BANK		Date of Receipt
Mailing Address P.O. BOX 4418		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2018"/>
City ATLANTA	State GA	Zip Code 30302
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.26984
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item JFC DEPOSIT OVRAGE - SEE DISGORGED FUNDS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="50.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="450.00"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial) A. ADLER, JEREMY, , ,		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 2200 12TH COURT N APT 1106		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I2680I Amount of Each Disbursement this Period [REDACTED] 407.01	
City ARLINGTON	State VA	Zip Code 22201	Category/ Type [REDACTED]
Purpose of Disbursement JFC TRAVEL EXPENSES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. ADLER, JEREMY, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 2200 12TH COURT N APT 1106		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I2683I Amount of Each Disbursement this Period [REDACTED] 7221.68	
City ARLINGTON	State VA	Zip Code 22201	Category/ Type [REDACTED]
Purpose of Disbursement JFC SALARY		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ADLER, JEREMY, , ,		Date of Disbursement MM / DD / YYYY 11 / 06 / 2018	
Mailing Address 2200 12TH COURT N APT 1106		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I2687I Amount of Each Disbursement this Period [REDACTED] 157.77	
City ARLINGTON	State VA	Zip Code 22201	Category/ Type [REDACTED]
Purpose of Disbursement JFC TRAVEL EXPENSE		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 7786.46
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ADLER, JEREMY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2200 12TH COURT N
APT 1106

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2692I

Amount of Each Disbursement this Period: 7221.67

Memo Item

B. DAY, VANESSA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1325 18TH STREET NW
APT. 304

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I26834

Amount of Each Disbursement this Period: 6938.54

Memo Item

C. DAY, VANESSA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1325 18TH STREET NW
APT. 304

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement JFC SALARY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2692I

Amount of Each Disbursement this Period: 6938.54

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 21098.75

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. DIVINCENTIS, ELIZABETH, , ,

Mailing Address 1920 14TH ST NW #707

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I2683
Amount of Each Disbursement this Period
[Redacted] 5700.84

Memo Item

Full Name (Last, First, Middle Initial)

B. DIVINCENTIS, ELIZABETH, , ,

Mailing Address 1920 14TH ST NW #707

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	8		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I2692f
Amount of Each Disbursement this Period
[Redacted] 5700.85

Memo Item

Full Name (Last, First, Middle Initial)

C. GRIBBIN, BRIDGET, K, ,

Mailing Address 1618 19TH ST NW APT 7

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	8		

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I2683
Amount of Each Disbursement this Period
[Redacted] 7281.45

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	8	6	8	3	.	1	4
---	---	---	---	---	---	---	---

TOTAL This Period (last page this line number only)..... ▶

1	8	6	8	3	.	1	4
---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. GRIBBIN, BRIDGET, K, ,

Mailing Address 1618 19TH ST NW APT 7

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2692!

Amount of Each Disbursement this Period

[REDACTED] 7281.45

Memo Item

Full Name (Last, First, Middle Initial)

B. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26831

Amount of Each Disbursement this Period

[REDACTED] 7891.65

Memo Item

Full Name (Last, First, Middle Initial)

C. HAMEL, LAUREN, G., ,

Mailing Address 2425 KING ST

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2692

Amount of Each Disbursement this Period

[REDACTED] 7891.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 23064.76

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2683I

Amount of Each Disbursement this Period

9278.21

Memo Item

Full Name (Last, First, Middle Initial)

B. KASTAN, JACOB, , ,

Mailing Address 1100 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-2307

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2692I

Amount of Each Disbursement this Period

9278.22

Memo Item

Full Name (Last, First, Middle Initial)

C. MCDONALD, OLIVIA, M, ,

Mailing Address 1407 CORCORAN ST NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2682I

Amount of Each Disbursement this Period

7035.52

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

25591.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MCDONALD, OLIVIA, M, ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Mailing Address 1407 CORCORAN ST NW

FEC Identification Number

C []

Transaction ID : SB21B.I2692
Amount of Each Disbursement this Period

[] 7035.52

Memo Item

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement JFC SALARY

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. SEIFERT, KEVIN, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Mailing Address 1391 PENNSYLVANIA AVE SE #325

FEC Identification Number

C []

Transaction ID : SB21B.I26801
Amount of Each Disbursement this Period

[] 857.76

Memo Item

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement SEE MEMO ENTRIES BELOW

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. AVIS RENT A CAR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

Mailing Address 6 SYLVAN WAY

FEC Identification Number

C []

Transaction ID : SB21B.I2680
Amount of Each Disbursement this Period

[] 148.91

Memo Item

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement JFC CAR RENTAL

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 7893.28

TOTAL This Period (last page this line number only)..... ▶

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. THE SOURCE

Mailing Address 575 PENNSYLVANIA AVE NW

City
WASHINGTON

State
DC

Zip Code
20565

Purpose of Disbursement
JFC EVENT CATERING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I2680
Amount of Each Disbursement this Period
[Redacted] 469.40

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 182 HOWARD ST #8

City
SAN FRANCISCO

State
CA

Zip Code
94105

Purpose of Disbursement
JFC TRANSPORTATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I2680
Amount of Each Disbursement this Period
[Redacted] 146.35

Memo Item

Full Name (Last, First, Middle Initial)

C. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [Redacted]
Transaction ID : SB21B.I2682
Amount of Each Disbursement this Period
[Redacted] 9235.38

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[Redacted]	9235.38
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[Redacted]	
------------	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC SALARY

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2692'

Amount of Each Disbursement this Period

9235.39

Memo Item

Full Name (Last, First, Middle Initial)

B. SEIFERT, KEVIN, , ,

Mailing Address 1391 PENNSYLVANIA AVE SE #325

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC TRAVEL & MEAL EXPENSES (NO ITEMIZATION NECESSARY)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

FEC Identification Number

C

Transaction ID : SB21B.I26951

Amount of Each Disbursement this Period

692.06

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2678

Amount of Each Disbursement this Period

94.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10022.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26811

Amount of Each Disbursement this Period

[REDACTED] 14.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26827

Amount of Each Disbursement this Period

[REDACTED] 41998.22

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2691

Amount of Each Disbursement this Period

[REDACTED] 113.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 42126.21

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2692I
Amount of Each Disbursement this Period

[REDACTED] 41998.19

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 1 ADP BLVD

City
ROSELAND

State
NJ

Zip Code
07068

Purpose of Disbursement
JFC PAYROLL EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26954
Amount of Each Disbursement this Period

[REDACTED] 127.99

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2678
Amount of Each Disbursement this Period

[REDACTED] 914.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 43040.78

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2679

Amount of Each Disbursement this Period: 57.97

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2679

Amount of Each Disbursement this Period: 244.05

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 3RD STREET

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2679

Amount of Each Disbursement this Period: 27.41

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 329.43

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C []

Transaction ID : SB21B.I2681f
Amount of Each Disbursement this Period

[] 103.49

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

FEC Identification Number

C []

Transaction ID : SB21B.I2681f
Amount of Each Disbursement this Period

[] 14.41

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2018			

FEC Identification Number

C []

Transaction ID : SB21B.I2682
Amount of Each Disbursement this Period

[] 226.97

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 344.87

[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2684'
Amount of Each Disbursement this Period

[REDACTED] 108.46

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2684'
Amount of Each Disbursement this Period

[REDACTED] 7.06

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2686'
Amount of Each Disbursement this Period

[REDACTED] 253.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 369.02

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2686

Amount of Each Disbursement this Period

[REDACTED] 34.05

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2691

Amount of Each Disbursement this Period

[REDACTED] 91.72

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3RD STREET

City
BATON ROUGE

State
LA

Zip Code
70801

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2691

Amount of Each Disbursement this Period

[REDACTED] 150.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 276.70

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

Full Name (Last, First, Middle Initial)
A. ANEDOT

Date of Disbursement: MM / DD / YYYY
11 / 14 / 2018

Mailing Address 3RD STREET

City: BATON ROUGE State: LA Zip Code: 70801

Purpose of Disbursement: JFC CC TRANSACTION FEES

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I2693I
Amount of Each Disbursement this Period: 35.84

Memo Item

Full Name (Last, First, Middle Initial)
B. ANEDOT

Date of Disbursement: MM / DD / YYYY
11 / 20 / 2018

Mailing Address 3RD STREET

City: BATON ROUGE State: LA Zip Code: 70801

Purpose of Disbursement: JFC CC TRANSACTION FEES

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I2695I
Amount of Each Disbursement this Period: 19.80

Memo Item

Full Name (Last, First, Middle Initial)
C. ASPECT CONSULTING

Date of Disbursement: MM / DD / YYYY
11 / 06 / 2018

Mailing Address 8401 EXCELSIOR DR STE 103

City: MADISON State: WI Zip Code: 53717

Purpose of Disbursement: JFC DIRECT MAIL CAGING

Candidate Name: _____

Office Sought: House Disbursement For: Primary General
 Senate Other (specify) ▼
 President

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I2689I
Amount of Each Disbursement this Period: 2090.31

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2145.95

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2683I

Amount of Each Disbursement this Period

[REDACTED] 165000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN CAPITAL GROUP, LLC

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2695I

Amount of Each Disbursement this Period

[REDACTED] 90000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2686I

Amount of Each Disbursement this Period

[REDACTED] 2159.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 257159.90

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE
STE. 100

City
WARRENTON

State
VA

Zip Code
20186

Purpose of Disbursement
JFC LEGAL SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2689
Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2632 MARINE WAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26908
Amount of Each Disbursement this Period

[REDACTED] 35.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2684
Amount of Each Disbursement this Period

[REDACTED] 222.56

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[REDACTED] 5257.56

TOTAL This Period (last page this line number only)..... ▶

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. ISTREAM FINANCIAL SERVICES

Mailing Address 13555 BISHOPS CT

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

C []
Transaction ID : SB21B.I2695
Amount of Each Disbursement this Period
[] 220.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE. 101

City
ATHENS

State
GA

Zip Code
30605

Purpose of Disbursement
JFC COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2018			

FEC Identification Number

C []
Transaction ID : SB21B.I26815
Amount of Each Disbursement this Period
[] 6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT ST 2ND FL

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C []
Transaction ID : SB21B.I2683
Amount of Each Disbursement this Period
[] 30071.88

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

36291.88

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448-0254

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2678

Amount of Each Disbursement this Period: 7142.32

Memo Item

B. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448-0254

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2680

Amount of Each Disbursement this Period: 1901.65

Memo Item

C. SCM ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 1283 MAIN ST

City DUBLIN State NH Zip Code 34448-0254

Purpose of Disbursement JFC DIRECT MARKETING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 09 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2691

Amount of Each Disbursement this Period: 2433.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11477.18

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address P.O. BOX 4418

City
ATLANTA

State
GA

Zip Code
30302

Purpose of Disbursement
JFC BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2678!

Amount of Each Disbursement this Period

[REDACTED] 121.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SUNTRUST BANK CREDIT CARD

Mailing Address PO BOX 4928

City
ORLANDO

State
FL

Zip Code
32802-4928

Purpose of Disbursement
SEE MEMO ENTRIES BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2693!

Amount of Each Disbursement this Period

[REDACTED] 3833.89

Memo Item

Full Name (Last, First, Middle Initial)

C. ADOBE

Mailing Address 345 PARK AVENUE

City
SAN JOSE

State
CA

Zip Code
95110

Purpose of Disbursement
JFC SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2693

Amount of Each Disbursement this Period

[REDACTED] 14.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 3954.89

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. AMAZON.COM

Mailing Address 410 TERRY AVE. N

City
SEATTLE

State
WA

Zip Code
98109

Purpose of Disbursement
JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C []
Transaction ID : SB21B.I26934
Amount of Each Disbursement this Period
[] 105.99

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C []
Transaction ID : SB21B.I26934
Amount of Each Disbursement this Period
[] 129.25

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 3640 HACKS CROSS RD

City
MEMPHIS

State
TN

Zip Code
38125

Purpose of Disbursement
JFC SHIPPING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C []
Transaction ID : SB21B.I26934
Amount of Each Disbursement this Period
[] 3213.36

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[]	0.00
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[]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE STE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement JFC SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26937

Amount of Each Disbursement this Period

[REDACTED] 75.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 2900 DEERFIELD DRIVE SUITE 5

City JANESVILLE State WI Zip Code 53546-3454

Purpose of Disbursement JFC OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26937

Amount of Each Disbursement this Period

[REDACTED] 295.30

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2678

Amount of Each Disbursement this Period

[REDACTED] 11994.51

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 11994.51

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2679I

Amount of Each Disbursement this Period

8424.67

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2680I

Amount of Each Disbursement this Period

17461.75

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2680I

Amount of Each Disbursement this Period

4209.38

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

30095.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 24 / 2018

FEC Identification Number: C
Transaction ID : SB21B.I2681'
Amount of Each Disbursement this Period: 2557.70

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 25 / 2018

FEC Identification Number: C
Transaction ID : SB21B.I2681'
Amount of Each Disbursement this Period: 8539.12

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C
Transaction ID : SB21B.I2683
Amount of Each Disbursement this Period: 13961.09

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 25057.91

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C
Transaction ID : SB21B.I2683;
Amount of Each Disbursement this Period: 23755.00

Memo Item

B. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C
Transaction ID : SB21B.I2684C
Amount of Each Disbursement this Period: 8162.04

Memo Item

C. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD FL 10

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C
Transaction ID : SB21B.I2684
Amount of Each Disbursement this Period: 8798.26

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 40715.30

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2686
Amount of Each Disbursement this Period

10164.21

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2686
Amount of Each Disbursement this Period

8511.44

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : SB21B.I2690
Amount of Each Disbursement this Period

22654.41

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

41330.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26911

Amount of Each Disbursement this Period

[REDACTED] 2443.25

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I26914

Amount of Each Disbursement this Period

[REDACTED] 10.25

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL 10

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
JFC CC TRANSACTION FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2695

Amount of Each Disbursement this Period

[REDACTED] 80.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 2533.50

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC RENT & PHONES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			16			2018					

FEC Identification Number

C C00002931

Transaction ID : SB21B.I2693I

Amount of Each Disbursement this Period

7876.98

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7876.98

685754.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

C C00002931

Transaction ID : SB22.I26791

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS (NRCC BUILDING FUND)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

C C00002931

Transaction ID : SB22.I26792

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PROSPERITY ACTION, INC.

Mailing Address 320 FIRST ST SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

C C00377689

Transaction ID : SB22.I26793

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Ryan

A. DEPARTMENT OF THE TREASURY

Full Name (Last, First, Middle Initial)

Mailing Address 1500 PENNSYLVANIA AVENUE

City WASHINGTON State DC Zip Code 20220-0001

Purpose of Disbursement DISGORGEMENT OF FUNDS (SEE MEMO ENTRY BELOW)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 11 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB29.I26987

Amount of Each Disbursement this Period: 50.00

Memo Item

B. SUNTRUST BANK

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4418

City ATLANTA State GA Zip Code 30302

Purpose of Disbursement DISGORGED FUNDS FROM DEPOSIT OVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 11 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB29.I26988

Amount of Each Disbursement this Period: 50.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 50.00

TOTAL This Period (last page this line number only)..... ▶ 50.00