

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 337 Vienna Avenue
Suite 1
 Check if different than previously reported. (ACC) Niles OH 44446

2. **FEC IDENTIFICATION NUMBER** C C00373464 CITY STATE ZIP CODE STATE DISTRICT
 IS THIS REPORT NEW (N) **OR** AMENDED (A) OH 13

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)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2014 through 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Allen Ryan
Signature of Treasurer Allen Ryan *[Electronically Filed]* Date M M / D D / Y Y Y Y
10 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TIM RYAN FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	206564.53	988155.53
(b) Total Contribution Refunds (from Line 20(d))	6300.00	9500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	200264.53	978655.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	126371.83	655697.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	720.88
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	126371.83	654977.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	461301.36	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

TIM RYAN FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	45833.00	376258.00
(ii) Unitemized.....	9950.00	35566.00
(iii) TOTAL of contributions from individuals ▶	55783.00	411824.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	150781.53	576331.53
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	206564.53	988155.53
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	720.88
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	715.24
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	206564.53	989591.65

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	126371.83	655697.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	6300.00	7000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6300.00	9500.00
21. OTHER DISBURSEMENTS	700.00	49793.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	133371.83	714990.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	388108.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	206564.53
25. SUBTOTAL (add Line 23 and Line 24).....	594673.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	133371.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	461301.36

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Scott Abshire

Mailing Address 1111 Valley Commons Dr

City State Zip Code
Huffman TX 77336-4620

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

Name of Employer Occupation
Cheniere VP & CIO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : C10215804

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
John G. Apostolakis

Mailing Address 3156 State Route 5

City State Zip Code
Cortland OH 44410-9237

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

Name of Employer Occupation
Apostolakis Honda Cars Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188450

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Kevin D. Arnold

Mailing Address 4918 Augusta Woods Ct

City State Zip Code
Westerville OH 43082-8990

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

Name of Employer Occupation
Center for Cognitive & Behavioral Ther Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : C10192392

Amount of Each Receipt this Period
600.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Laura Barbanel

Mailing Address 62 Pierrepont St

City State Zip Code
Brooklyn NY 11201-2442

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

Name of Employer Self Occupation Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : C10192283

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Bret Barnhizer

Mailing Address 6935 Youngstown Pittsburgh Rd

City State Zip Code
Poland OH 44514-3753

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

Name of Employer NanoLogix Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : C10118009

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Lisa Blue Baron

Mailing Address 5950 Deloache Ave

City State Zip Code
Dallas TX 75225-3005

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C10223183

Amount of Each Receipt this Period
1000.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Beer

Mailing Address 6943 Lerwick Ct

City Alexandria State VA Zip Code 22315

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

Name of Employer Alignment Government Strategies Occupation Govt. Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : C10196233

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Philip M. Beshara

Mailing Address 8664 Kimblewick Ln NE

City Warren State OH Zip Code 44484-2068

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

Name of Employer B & B Contractors & Developers Inc. Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204756

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
David J. Betras

Mailing Address 1491 Barbie Dr

City Youngstown State OH Zip Code 44512-3729

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

Name of Employer Betras, Kopp & Harshman LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204794

Amount of Each Receipt this Period
250.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard J Billak

Mailing Address 2299 Birch Trace Dr

City Youngstown State OH Zip Code 44515-4912

FEC ID number of contributing federal political committee.

Name of Employer n/a Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C10204777

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Lindsey R. Buckman

Mailing Address 818 E Osborn Rd Ste 107

City Phoenix State AZ Zip Code 85014-5218

FEC ID number of contributing federal political committee.

Name of Employer Self Occupation Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C10192387

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Rose Caiola

Mailing Address 230 E 85th St

City New York State NY Zip Code 10028-3001

FEC ID number of contributing federal political committee.

Name of Employer Bettina Equities Company Occupation Real Estate Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C10216301

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Janet M. Carson

Mailing Address 8860 Apple Hill Rd

City Chagrin Falls State OH Zip Code 44023-5822

FEC ID number of contributing federal political committee.

Name of Employer ID Agency, Inc. Occupation owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204799

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
John M. Condoleon

Mailing Address 8560 Deer Creek Ln NE

City Warren State OH Zip Code 44484-2032

FEC ID number of contributing federal political committee.

Name of Employer Warren Screw Machine Occupation President and Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204755

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Trina Cutter

Mailing Address 3031 Cromer Avenue NW

City Canton State OH Zip Code 44709

FEC ID number of contributing federal political committee.

Name of Employer Western Reserve Public Media Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : C10196443

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ankit N. Desai

Mailing Address 1725 19th street, NW

City Washington State DC Zip Code 20009

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

Name of Employer Cheniere Energy Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : C10209676

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Jennifer Rottegal DiJames

Mailing Address 2411 Culpeper Rd

City Alexandria State VA Zip Code 22308-2132

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

Name of Employer Alignment Gov't Strategies Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : C10209595

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Louise A. Douce

Mailing Address 4707 Blue Church Rd

City Sunbury State OH Zip Code 43074-9519

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

Name of Employer Ohio State Univ Occupation Special Asst to VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : C10192394

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Thomas M. Durkin

Mailing Address 159 Griswold Dr

City State Zip Code
Youngstown OH 44512-2827

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204795

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Linda K Fankhauser

Mailing Address 1641 Overlook Rd

City State Zip Code
Kent OH 44240-5903

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

Name of Employer Occupation
Portage County Recorder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188459

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Lori Fiorino

Mailing Address 1655 Windsor Trce NE

City State Zip Code
Warren OH 44484-1782

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

Name of Employer Occupation
USPS Postal Worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188473

Amount of Each Receipt this Period
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dominick L. Flarey

Mailing Address 1477 Tripodi Cir

City	State	Zip Code
Niles	OH	44446-3564

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

Name of Employer	Occupation
Dominick Flarey & Associates	President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188434

Amount of Each Receipt this Period
 _____ 200.00

B. Full Name (Last, First, Middle Initial)
D. Joseph Fleming

Mailing Address 6686 Katahdin Dr

City	State	Zip Code
Poland	OH	44514-2161

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

Name of Employer	Occupation
Falcon Transport Company	Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188452

Amount of Each Receipt this Period
 _____ 50.00

C. Full Name (Last, First, Middle Initial)
Bravada Garrett-Akinsanya

Mailing Address 13805 60th Ave N

City	State	Zip Code
Minneapolis	MN	55446-3583

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

Name of Employer	Occupation
Self	Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : C10192395

Amount of Each Receipt this Period
 _____ 500.00

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

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

_____ 750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stuart I. Garson

Mailing Address 614 W Superior Ave
1600

City Cleveland State OH Zip Code 44113-1334

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

Name of Employer Garson & Associates Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204762

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Charles T. George

Mailing Address 491 Millbrook St

City Canfield State OH Zip Code 44406-9663

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

Name of Employer Hapco Inc Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10205031

Amount of Each Receipt this Period
3000.00

\$400 refunded 9/15/14

C. Full Name (Last, First, Middle Initial)
Greg Greenwood

Mailing Address 1095 Torrey Pines St NE

City Warren State OH Zip Code 44484-6711

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

Name of Employer Greenwood Chevrolet Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204750

Amount of Each Receipt this Period
500.00

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

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

3750.00

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

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

FOR LINE NUMBER: PAGE 14 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. Corey Grindal

Mailing Address 5811 Springton Ln

City State Zip Code
Spring TX 77379-7853

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

Name of Employer Occupation
Cheniere VP, Supply

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : C10215805

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Donna J. Guerra

Mailing Address 1085 Eastland Ave SE

City State Zip Code
Warren OH 44484-4511

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204800

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Donna L. Guerra

Mailing Address 1764 Stillwagon Rd

City State Zip Code
Niles OH 44446-4437

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

Name of Employer Occupation
Mahoning Valley Economic Development C Loan Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204752

Amount of Each Receipt this Period
200.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Patrick N. Guliano		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 100 Paulo Dr NE		Transaction ID : C10188461	
City Warren	State OH	Zip Code 44483-4662	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer None		Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) B. William H. Hall		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 79 W Cove View Trl		Transaction ID : C10215806	
City Spring	State TX	Zip Code 77389-7597	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 750.00	
Name of Employer Cheniere		Occupation VP Pipeline O&M	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) C. Paula E. Hartman-Stein		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 631 Rustic Knoll Dr		Transaction ID : C10192282	
City Kent	State OH	Zip Code 44240-2451	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Center for Healthy Aging		Occupation Clinical Geropsychologist	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1450.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Matthew Hersha

Mailing Address 3179 Dunlavin Glen Rd

City Columbus State OH Zip Code 43221-4419

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

Name of Employer United Art & Education, Inc. Occupation Senior Associate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : C10193893

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Nancy C. Heslop

Mailing Address 950 Merriman Rd

City Akron State OH Zip Code 44303-1750

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

Name of Employer Heslop Inc. Occupation Co-Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188431

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Michael J. Horvitz

Mailing Address 1001 Lakeside Ave E Ste 900

City Cleveland State OH Zip Code 44114-1177

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

Name of Employer Parkland Management Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223184

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sally Singer Horwatt Brodsky

Mailing Address 1926 Upper Lake Dr

City Reston State VA Zip Code 20191-3620

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

Name of Employer Self Occupation Clincial Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : C10192402

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Martin S. Hume Esq.

Mailing Address 1169 Academy Drive

City Youngstown State OH Zip Code 44505

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

Name of Employer City of Youngstown Occupation Law Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204782

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Louis P. Joseph

Mailing Address 829 Moraine Dr

City Youngstown State OH Zip Code 44509-1935

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

Name of Employer Home Savings & Loan Occupation VP Prop/Purchasing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204774

Amount of Each Receipt this Period
200.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bernard J. Kosar Sr.		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 69 Alabaster Ave		Transaction ID : C10188438
City Canfield	State OH	
Zip Code 44406-7601		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer n/a	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. John L. Landolfi		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 2006 Chatfield Rd		Transaction ID : C10223182
City Columbus	State OH	
Zip Code 43221-3704		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Vorys Sater Seymour & Pease LLP	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C. Peter C. LaRose		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 6745 Southpointe Pkwy		Transaction ID : C10151214
City Brecksville	State OH	
Zip Code 44141-3267		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer House of LaRose	Occupation Vice President	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Lastic Sr.

Mailing Address 950 Park Pl

City Niles State OH Zip Code 44446-3555

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

Name of Employer Niles City Schools Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204754

Amount of Each Receipt this Period
 200.00

Amount of Each Receipt this Period
 400.00

B. Full Name (Last, First, Middle Initial)
Michael Lemle

Mailing Address 110 Riverside Drive

City New York State NY Zip Code 10024

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

Name of Employer Lemle Pictures, Inc. Occupation Filmmaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : C10216335

Amount of Each Receipt this Period
 108.00

Amount of Each Receipt this Period
 358.00

C. Full Name (Last, First, Middle Initial)
Roger E. Lindgren

Mailing Address 20118 Mansfield Park Ln

City Spring State TX Zip Code 77379-2956

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : C10215807

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 250.00

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

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

558.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Keith G. Little

Mailing Address 3907 Swarthmore St

City Houston State TX Zip Code 77005-3611

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

Name of Employer Cheniere Occupation VP, Business Dev

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : C10215808

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Melissa M. Long

Mailing Address 978 Cottage Gate Dr

City Kent State OH Zip Code 44240-1844

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

Name of Employer n/a Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204769

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Melissa M. Long

Mailing Address 978 Cottage Gate Dr

City Kent State OH Zip Code 44240-1844

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

Name of Employer n/a Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204780

Amount of Each Receipt this Period
 100.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 21 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Drew Lynch

Mailing Address 3333 Allen Pkwy
Unit 2109

City Houston State TX Zip Code 77019-1847

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

Name of Employer Cheniere Energy Inc Occupation Sr Vice President, Business Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : C10210724

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Steven Maas

Mailing Address 4360 Hott West Rd

City Newton Falls State OH Zip Code 44444-9486

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

Name of Employer Heller Maas Moro & Magill Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188462

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Bonnie Markham

Mailing Address 52 Pearl St

City Metuchen State NJ Zip Code 08840-1831

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

Name of Employer Self Occupation Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204760

Amount of Each Receipt this Period
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Melissa M. Masternick

Mailing Address 7887 Via Atillio

City Youngstown State OH Zip Code 44514-5346

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : C10151212

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Susan H. McDaniel

Mailing Address 777 Clinton Ave S

City Rochester State NY Zip Code 14620-1448

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

Name of Employer University of Rochester Medical Center Occupation Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : C10151213

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Sean Mentel

Mailing Address 1824 Collingswood Rd

City Columbus State OH Zip Code 43221-3875

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

Name of Employer Kooperman Gillespie Mentel, LTD Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : C10198144

Amount of Each Receipt this Period
1000.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Thomas E. Mosure		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 4318 Tavistock Cir		Transaction ID : C10204745	
City Powell	State OH	Zip Code 43065-7715	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer MS Consultants	Occupation President/CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. Katherine C. Nordal		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 2701 Calvert St NW Apt 1109		Transaction ID : C10204751	
City Washington	State DC	Zip Code 20008-2615	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer American Psychological Association	Occupation Executive Director/Practice Directorat		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Howard J. OMalley Jr.		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 7532 Huntington Dr		Transaction ID : C10188480	
City Youngstown	State OH	Zip Code 44512-8036	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer B&T Express of North Lima , Ohio	Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

SUBTOTAL of Receipts This Page (optional).....	2200.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) John Osborne		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1134 11th Street #202		Transaction ID : C10216989
City Santa Monica	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Art of Living Foundation	Occupation Educator	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Patricia A. Outtrim		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 914 Main St Unit 2005		Transaction ID : C10215809
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cheniere	Occupation VP, Gov't & Regulatory Affairs	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Renato F. Pereira		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 6310 Auden St		Transaction ID : C10215810
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Cheniere	Occupation VP Origination	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Randy E. Phelps		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 5137 Westpath Way		Transaction ID : C10192389
City Bethesda	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Center for Psychology & Health	Occupation Sr. Advisor for Health Care Financing	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Aaron Pickrell		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 34 N Remington Rd		Transaction ID : C10205323
City Bexley	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Remington Road Group	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Douglas Polk		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 15615 Azalea Shores Dr		Transaction ID : C10205203
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Vallourec USA	Occupation Vice President - Industry Affairs	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Donna Rasin-Waters

Mailing Address 71 Midwood St

City State Zip Code
Brooklyn NY 11225-5003

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

Name of Employer Occupation
New York State Psychological Associati President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : C10192393

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Barbara S. Robinson

Mailing Address 2 Bratenahl Pl

City State Zip Code
Cleveland OH 44108-1182

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

Name of Employer Occupation
n/a Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204771

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Peter P. Rossi Jr.

Mailing Address 3925 Welcker Dr NE

City State Zip Code
Warren OH 44483-4540

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

Name of Employer Occupation
Rossi Funeral Home Funeral Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188448

Amount of Each Receipt this Period
200.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
April Ryan

Mailing Address 89 Hopewell Dr

City State Zip Code
Struthers OH 44471-1407

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204767

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Morgan T. Sammons

Mailing Address 1177 California St
Apt 805

City State Zip Code
San Francisco CA 94108-2221

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

Name of Employer Occupation
Nat'l Register of Health Service Psych Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188466

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Stephen M. Silberstein

Mailing Address 29 Eucalyptus Rd

City State Zip Code
Belvedere Tiburon CA 94920-2435

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : C10192381

Amount of Each Receipt this Period
1000.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James J. Skiffey

Mailing Address 621 Sophia Ct

City State Zip Code
Niles OH 44446-3827

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204764

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Susan B. Sokolov

Mailing Address 7763 Silver Fox Dr

City State Zip Code
Boardman OH 44512-5326

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188432

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Solomon

Mailing Address 5471 Logan Arms Dr

City State Zip Code
Girard OH 44420-1637

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

Name of Employer PES Equities, Inc. Occupation VP of Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204768

Amount of Each Receipt this Period
1000.00

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

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

3800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Zachary T. Space

Mailing Address 4 Parkview Dr

City State Zip Code
Dover OH 44622-1168

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

Name of Employer Occupation
Space Consulting, LLC Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204747

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Patricia L. Spencer Esq.

Mailing Address 8550 Hidden Hills Dr SE

City State Zip Code
Warren OH 44484-3065

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188479

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Patricia L. Spencer Esq.

Mailing Address 8550 Hidden Hills Dr SE

City State Zip Code
Warren OH 44484-3065

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204748

Amount of Each Receipt this Period
250.00

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Patricia A. Stark

Mailing Address 47 Groveland Ter

City State Zip Code
Minneapolis MN 55403-1104

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MN Psychological Assoc Psychologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C10188433

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Mark Stubbe

Mailing Address 3015 Carnegie St

City State Zip Code
Houston TX 77005-3809

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Cheniere Energy Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C10215811

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
John B. Taylor

Mailing Address 367 Country Club Dr NE

City State Zip Code
Warren OH 44484-4614

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Paige & Byrnes Insurance Insurance agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C10188493

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rocco A. Tondo

Mailing Address 901 Ravine Dr S

City State Zip Code
Mc Donald OH 44437-1787

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

Name of Employer Occupation
GenOn Energy General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204761

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ray Townsend

Mailing Address 1387 Union St SW

City State Zip Code
Warren OH 44485-3533

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188447

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Ray Townsend

Mailing Address 1387 Union St SW

City State Zip Code
Warren OH 44485-3533

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : C10209594

Amount of Each Receipt this Period
25.00

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Annie Umbricht		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 804 Huntsman Road		Transaction ID : C10196953
City Towson	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer JHUSOM	Occupation physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Annie Umbricht		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address 804 Huntsman Road		Transaction ID : C10215763
City Towson	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer JHUSOM	Occupation physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Laura A. Vennitti		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 1726 Laura Ln		Transaction ID : C10204763
City Mineral Ridge	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mary Anne Walsh		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 3538 Narragansett Ave		Transaction ID : C10215298	
City Annapolis	State MD	Zip Code 21403-4932	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Walsh Capitol Consulting, LLC	Occupation Consultant		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1290.00		

Full Name (Last, First, Middle Initial) B. Robert J. Wasko		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 6753 Bristlewood Dr Unit 2		Transaction ID : C10188455	
City Youngstown	State OH	Zip Code 44512-5132	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Wasko Funeral Home	Occupation Funeral Director		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. William A. Weimer		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014	
Mailing Address 2331 5th Ave		Transaction ID : C10127738	
City Youngstown	State OH	Zip Code 44504-1839	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer BJ Alan Company	Occupation attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Timothy Woofter

Mailing Address 8845 State St

City Kinsman State OH Zip Code 44428-9779

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

Name of Employer STANWADE METAL PRODUCTS INC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188449

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Michael Wortley

Mailing Address 122 Trinity Oaks Cir

City The Woodlands State TX Zip Code 77381-1410

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

Name of Employer Cheniere Energy, Inc. Occupation Senior Vice President and CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : C10202930

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Maruca Law Firm LLC

Mailing Address 201 E. Commerce St. Suite 316

City Youngstown State OH Zip Code 44503-1659

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : C10210679

Amount of Each Receipt this Period
500.00

LLC - Members below if itemized. Permissible funds.

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christopher A. Maruca

Mailing Address 3499 Olde Winter Trl

City State Zip Code
Youngstown OH 44514-5816

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : C10210680

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Susan G Maruca

Mailing Address 3499 Olde Winter Trl

City State Zip Code
Poland OH 44514-5816

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : C10210681

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

45833.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AIRBUS GROUP, INC. PAC

Mailing Address **2550 WASSER TERRACE**
SUITE 9000

City **HERNDON** State **VA** Zip Code **20171**

FEC ID number of contributing federal political committee. **C C00421230**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204813

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **421 AVIATION WAY**

City **FREDERICK** State **MD** Zip Code **21701**

FEC ID number of contributing federal political committee. **C C00131185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188501

Amount of Each Receipt this Period

2000.00

C. Full Name (Last, First, Middle Initial)
ALCOA INC. EMPLOYEES' VOLUNTARY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **1050 K ST. NW**
STE 1100

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00501106**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 23 / 2014

Transaction ID : C10215300

Amount of Each Receipt this Period

1500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICA'S NATURAL GAS ALLIANCE POLITICAL ACTION COMMITTEE

Mailing Address 701 EIGHTH STREET NW
SUITE 800

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00485250

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223705

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6TH STREET, NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223197

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15TH ST. NW
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : C10209680

Amount of Each Receipt this Period
2000.00

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

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

4500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188496

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10229583

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 TENTH STREET, NW
TWO CITYCENTER, SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : C10209679

Amount of Each Receipt this Period
2000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 39 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN IRON AND STEEL INSTITUTE POLITICAL ACTION COMMITTEE (STEEL PAC)

Mailing Address 25 MASSACHUSETTS AVE, NW SUITE 800
SUITE 800

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00295097

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : C10215304

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND

Mailing Address PO BOX 66

City DANIA BEACH State FL Zip Code 33004

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : C10215301

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223180

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 40 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

A. Mailing Address 1111 NORTH FAIRFAX ST.

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204812

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
AMERICAN PSYCHOLOGICAL ASSOCIATION PRACTICE ORGANIZATION POLITICAL ACTION COMMITTEE (APAPO)

B. Mailing Address PO BOX 65353

City State Zip Code
WASHINGTON DC 20035

FEC ID number of contributing federal political committee. **C** C00522094

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3331.53

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : C10209678

Amount of Each Receipt this Period
831.53

Full Name (Last, First, Middle Initial)
BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE

C. Mailing Address 100 PARK AVENUE

City State Zip Code
FLORHAM PARK NJ 07932

FEC ID number of contributing federal political committee. **C** C00340075

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : C10209603

Amount of Each Receipt this Period
3000.00

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

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

4831.53

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

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

FOR LINE NUMBER: PAGE 41 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLANK ROME PAC

Mailing Address 600 NEW HAMPSHIRE AVENUE, NW

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C C00150797**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : C10215299

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CARDINAL HEALTH INC. PAC AKA CARDINAL HEALTH COMPANIES PAC

Mailing Address 7000 CARDINAL PLACE

City State Zip Code
DUBLIN OH 43017

FEC ID number of contributing federal political committee. **C C00332833**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C10223204

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
CLIFFS' POLITICAL ACTION COMMITTEE

Mailing Address 200 PUBLIC SQUARE SUITE 3300

City State Zip Code
CLEVELAND OH 44114

FEC ID number of contributing federal political committee. **C C00039016**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : C10215309

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

A. Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223194

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
COMMITTEE ON PIPE AND TUBE IMPORTS FEDERAL PAC

B. Mailing Address 900 SEVENTH STREET NW SUITE 500

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00436485

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223205

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
Committee to Elect Daniel R. Yemma

C. Mailing Address 232 Center St

City Struthers State OH Zip Code 44471-2114

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204759

Amount of Each Receipt this Period
100.00

Permissible Funds

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 44 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Committee To Re-Elect Judge W Wyatt McKay

Mailing Address 161 High St

City Warren State OH Zip Code 44481

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204793

Amount of Each Receipt this Period
200.00

Permissible funds

B. Full Name (Last, First, Middle Initial)
Committee to Retain Judge Philip Vigorito

Mailing Address 729 Warren Ave

City Niles State OH Zip Code 44446

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188469

Amount of Each Receipt this Period
200.00

Permissible Funds

C. Full Name (Last, First, Middle Initial)
Committee to Retain Karen Infante Allen

Mailing Address 1139 Lantern Lane

City Niles State OH Zip Code 44446

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204787

Amount of Each Receipt this Period
100.00

Permissible funds

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 45 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Mailing Address **501 THIRD STREET, NW**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00002089**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 12 2014

Transaction ID : C10209602

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

B. Mailing Address **601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 30 2014

Transaction ID : C10223189

Amount of Each Receipt this Period
4000.00

Full Name (Last, First, Middle Initial)
D.R.I.V.E. DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATIONAL

C. Mailing Address **25 LOUISIANA AVE., NW**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00032979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 30 2014

Transaction ID : C10223703

Amount of Each Receipt this Period
5000.00

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

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

14000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

Mailing Address **ONE ENERGY PLAZA**
ROOM 1583 WCB

City **DETROIT** State **MI** Zip Code **48226**

FEC ID number of contributing federal political committee. **C C00081547**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C10223208

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address **550 SOUTH TRYON STREET**

City **CHARLOTTE** State **NC** Zip Code **28202**

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188497

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ELECTRICAL CONTRACTORS POLITICAL ACTION COMMITTEE

Mailing Address **3 BETHESDA METRO CENTER**
SUITE 1100

City **BETHESDA** State **MD** Zip Code **20814**

FEC ID number of contributing federal political committee. **C C00113811**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : C10151210

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 47 OF 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Family's for Adrian Biviano

Mailing Address 2637 Black Oak Dr

City State Zip Code
Niles OH 44446-4456

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 08 2014

Transaction ID : C10204804

Amount of Each Receipt this Period
100.00

Permissible Funds

B. Full Name (Last, First, Middle Initial)
FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE

Mailing Address 550 E. WALNUT ST

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00290502

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 08 2014

Transaction ID : C10204811

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
FORD MOTOR COMPANY CIVIC ACTION FUND

Mailing Address PO BOX 75000

City State Zip Code
DETROIT MI 48275

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 23 2014

Transaction ID : C10215306

Amount of Each Receipt this Period
1000.00

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 48 OF 123
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Friends for Ginther

Mailing Address 545 E. Town St.

City Columbus State OH Zip Code 43215

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204809

Amount of Each Receipt this Period
 1000.00

Permissible funds

B. Full Name (Last, First, Middle Initial)
Friends of Joe Schiavoni for State Senate

Mailing Address 87 Westchester Dr.

City Youngstown State OH Zip Code 44515-3902

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188494

Amount of Each Receipt this Period
 100.00

Permissible Funds

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
 SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : C10151206

Amount of Each Receipt this Period
 5000.00

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

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

6100.00

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

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

FOR LINE NUMBER: PAGE 49 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00076810**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223190

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
GRANITE CONSTRUCTION INC. EMPLOYEE PAC - GRANITEPAC

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C C00337394**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188502

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
HEARTLAND PAC

Mailing Address 5580 SPRING GROVE DRIVE

City SOLON State OH Zip Code 44139

FEC ID number of contributing federal political committee. **C C00131557**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223199

Amount of Each Receipt this Period
2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223706

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
HUNTINGTON BANCSHARES INC. POLITICAL ACTION COMMITTEE (HBI-PAC)

Mailing Address 41 S. HIGH ST

City COLUMBUS State OH Zip Code 43287

FEC ID number of contributing federal political committee. **C** C00165589

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204810

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : C10188003

Amount of Each Receipt this Period
2500.00

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 51 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

A. Mailing Address 1750 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : C10201987

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
L BRANDS, INC. POLITICAL ACTION COMMITTEE (L BRANDS PAC)

Mailing Address THREE LIMITED PARKWAY

City State Zip Code
COLUMBUS OH 43230

FEC ID number of contributing federal political committee. **C** C00214338

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223188

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
LEAGUE OF CONSERVATION VOTERS ACTION FUND

Mailing Address 1920 L ST NW SUITE 800

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223207

Amount of Each Receipt this Period
 1000.00

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

4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. BOX 75000 MC2250		Transaction ID : C10223198
City DETROIT	State MI	
FEC ID number of contributing federal political committee. C C00496307		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) Marozzi For County Engineer Committee		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 4837 King Meadow Trl		Transaction ID : C10151211
City Kent	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	Permissible Funds
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

Full Name (Last, First, Middle Initial) NARAL PRO-CHOICE AMERICA PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1156 15TH STREET, NW		Transaction ID : C10215302
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C C00079541		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204815

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : C10215308

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10221537

Amount of Each Receipt this Period
500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 54 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N STREET NW
 City WASHINGTON State DC Zip Code 20036

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223210

FEC ID number of contributing federal political committee. C C00009985

Amount of Each Receipt this Period
 1000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE
 City CHICAGO State IL Zip Code 60611

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204844

FEC ID number of contributing federal political committee. C C00030718

Amount of Each Receipt this Period
 4000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 6000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET SUITE 600
 City ALEXANDRIA State VA Zip Code 22314

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223202

FEC ID number of contributing federal political committee. C C00144766

Amount of Each Receipt this Period
 2500.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10000.00

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 55 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1750 H STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00107128**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223203

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
NATIONWIDE MUTUAL INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address ONE NATIONWIDE PLAZA
1-32-301

City COLUMBUS State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C C00076174**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204807

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16TH STREET NW STE 418

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00003251**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10229584

Amount of Each Receipt this Period
 2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NETJETS INC. PAC

Mailing Address 4111 BRIDGEWAY AVENUE

City State Zip Code
COLUMBUS OH 43219

FEC ID number of contributing federal political committee. **C C00481309**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : C10209682

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
NEW ALBANY PAC, THE

Mailing Address 550 EAST WALNUT STREET

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C C00382432**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204808

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
NISOURCE INC. PAC

Mailing Address 200 CIVIC CENTER DRIVE

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223185

Amount of Each Receipt this Period
2000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 57 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NISOURCE INC. PAC

Mailing Address **200 CIVIC CENTER DRIVE**

City **COLUMBUS** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C10223186

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
NUCOR CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **1915 REXFORD ROAD**

City **CHARLOTTE** State **NC** Zip Code **28211**

FEC ID number of contributing federal political committee. **C C00379628**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C10221541

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
OHIO ASSOCIATION OF MEDICAL EQUIPMENT SERVICES-PAC (AKA OAMES PAC)

Mailing Address **4700 LAKEHURST COURT SUITE 225**

City **DUBLIN** State **OH** Zip Code **43016**

FEC ID number of contributing federal political committee. **C C00430223**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : C10209683

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 58 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OMNOVA SOLUTIONS INC POLITICAL ACTION COMMITTEE (OPAC)

Mailing Address 175 GHENT ROAD

City State Zip Code
FAIRLAWN OH 44333

FEC ID number of contributing federal political committee. **C C00349993**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188498

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
PARKER -HANNIFIN CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 6035 PARKLAND BOULEVARD

City State Zip Code
CLEVELAND OH 44124

FEC ID number of contributing federal political committee. **C C00135459**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : C10151205

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
PRECISION MACHINED PRODUCTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 6700 W. SNOWVILLE ROAD

City State Zip Code
BRECKSVILLE OH 44141

FEC ID number of contributing federal political committee. **C C00110858**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10221539

Amount of Each Receipt this Period
 2000.00

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

5500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 123
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Mailing Address 6363 OAK TREE BLVD.

City INDEPENDENCE State OH Zip Code 44131

FEC ID number of contributing federal political committee. **C** C00082271

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10221538

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223178

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Rice For Judge Committee

Mailing Address 48 W. Libery St.

City Hubbard State OH Zip Code 44425

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188486

Amount of Each Receipt this Period
 200.00

Permissible Funds

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROETZEL & ANDRESS CO, LPA FSL PAC

Mailing Address 222 S. MAIN STREET

City State Zip Code
AKRON OH 44308

FEC ID number of contributing federal political committee. **C** C00228379

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204845

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Sammarone Campaign Committee

Mailing Address 1283 Cherokee Dr.

City State Zip Code
Youngstown OH 44511

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188463

Amount of Each Receipt this Period
50.00

Permissible Funds

C. Full Name (Last, First, Middle Initial)
SEAFARERS POLITICAL ACTIVITY DONATION - SEAFARERS INTERNATIONAL UNION OF NA-AGLIWD/NMU

Mailing Address 5201 AUTH WAY

City State Zip Code
CAMP SPRINGS MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223191

Amount of Each Receipt this Period
1000.00

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 123
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188500

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
THE BABCOCK & WILCOX COMPANY POLITICAL ACTION COMMITTEE (B&W PAC)

Mailing Address 2016 MT. ATHOS ROAD

City LYNCHBURG State VA Zip Code 24504

FEC ID number of contributing federal political committee. **C** C00365502

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204814

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223201

Amount of Each Receipt this Period
5000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 123
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE SCOTTS MIRACLE-GRO COMPANY STEWARDSHIP PAC

Mailing Address 14111 SCOTTSLAWN ROAD

City MARYSVILLE State OH Zip Code 43041

FEC ID number of contributing federal political committee. **C** C00365254

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C10188495

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
TRINITY INDUSTRIES EMPLOYEE POLITICAL ACTION COMMITTEE (SF) INC.

Mailing Address 2525 STEMMONS FREEWAY

City DALLAS State TX Zip Code 75207

FEC ID number of contributing federal political committee. **C** C00268904

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C10223206

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP

Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014

Transaction ID : C10204816

Amount of Each Receipt this Period
 5000.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITED STEELWORKERS POLITICAL ACTION FUND

Mailing Address **FIVE GATEWAY CENTER**

City **PITTSBURGH** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C C00003590**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : C10209681

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **1101 PENNSYLVANIA AVE, NW
10TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C10223187

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
UTILITY WORKERS UNION OF AMERICA COPE

Mailing Address **815 16TH ST. NW**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00040741**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C10188499

Amount of Each Receipt this Period
2500.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 123
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VSS&P FEDPAC

Mailing Address **52 E. GAY STREET**
P.O. BOX 1008

City **COLUMBUS** State **OH** Zip Code **43216**

FEC ID number of contributing federal political committee. **C C00220764**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : C10204806

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address **805 FIFTEENTH ST NW SUITE 430**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00147173**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : C10215307

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
WOOLPERT INC PAC

Mailing Address **4454 IDEA CENTER BLVD.**

City **DAYTON** State **OH** Zip Code **45430**

FEC ID number of contributing federal political committee. **C C00479899**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : C10215305

Amount of Each Receipt this Period
1000.00

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

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

4500.00

150781.53

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 485.40 Transaction ID : D549729
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Telephone expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 406 7th Street, NW 3rd Floor		Amount of Each Disbursement this Period 761.00 Transaction ID : D549779
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Website expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 406 7th Street, NW 3rd Floor		Amount of Each Disbursement this Period 756.00 Transaction ID : D549780
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Website expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2002.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 406 7th Street, NW 3rd Floor		Amount of Each Disbursement this Period 757.00
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Website expense	Transaction ID : D549781
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cafe Recess		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 634.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising catering	Transaction ID : D549834
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Cardinal Mooney High School		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 2545 Erie Street		Amount of Each Disbursement this Period 150.00
City Youngstown	State OH	
Zip Code 44507	Purpose of Disbursement Advertisement	Transaction ID : D549680
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1541.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Petty Cash		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		22		2014
M M	/	D D	/	Y Y Y Y								
08		22		2014								
Mailing Address 1600 Roosevelt Avenue		Amount of Each Disbursement this Period										
City Niles	State OH	Zip Code 44446										
Purpose of Disbursement Petty Cash	<table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00									
250.00												
Candidate Name	Transaction ID : D549661											
Office Sought:	Disbursement For: 2014	Category/Type										
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Petty Cash		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		30		2014
M M	/	D D	/	Y Y Y Y								
09		30		2014								
Mailing Address 1600 Roosevelt Avenue		Amount of Each Disbursement this Period										
City Niles	State OH	Zip Code 44446										
Purpose of Disbursement Petty Cash	<table border="1"> <tr> <td>300.00</td> </tr> </table>		300.00									
300.00												
Candidate Name	Transaction ID : D549662											
Office Sought:	Disbursement For: 2014	Category/Type										
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
c. City of Niles, Ohio		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>09</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		09		2014
M M	/	D D	/	Y Y Y Y								
07		09		2014								
Mailing Address 34 W State St		Amount of Each Disbursement this Period										
City Niles	State OH	Zip Code 44446-5036										
Purpose of Disbursement Utilities	<table border="1"> <tr> <td>69.58</td> </tr> </table>		69.58									
69.58												
Candidate Name	Transaction ID : D549663											
Office Sought:	Disbursement For: 2014	Category/Type										
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	619.58
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Niles, Ohio		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 34 W State St		Amount of Each Disbursement this Period 152.15 Transaction ID : D549664
City Niles	State OH Zip Code 44446-5036	
Purpose of Disbursement Utilities	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. City of Niles, Ohio		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 34 W State St		Amount of Each Disbursement this Period 56.61 Transaction ID : D549665
City Niles	State OH Zip Code 44446-5036	
Purpose of Disbursement Utilities	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. City Printing		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 122 Oak Hill Avenue		Amount of Each Disbursement this Period 898.19 Transaction ID : D549731
City Youngstown	State OH Zip Code 44502	
Purpose of Disbursement Printing expense	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1106.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City Printing		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 122 Oak Hill Avenue		Amount of Each Disbursement this Period 2002.54 Transaction ID : D549732
City Youngstown	State OH	
Purpose of Disbursement Printing expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Crosby Mook Office Equipment		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 558 High St NE		Amount of Each Disbursement this Period 326.18 Transaction ID : D549641
City Warren	State OH	
Purpose of Disbursement Office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Telecom, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address PO Box 14497		Amount of Each Disbursement this Period 295.70 Transaction ID : D549733
City Poland	State OH	
Purpose of Disbursement Telephone expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2624.42
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dominion East Ohio			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO Box 26785			Amount of Each Disbursement this Period 82.89 Transaction ID : D549640
City Richmond	State VA	Zip Code 23261	
Purpose of Disbursement Utilities	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. John F. Erickson			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 437 New Jersey Avenue, SE			Amount of Each Disbursement this Period 275.00 Transaction ID : D549845
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Fundraising/Room fee	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Fraioli & Associates			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 75214			Amount of Each Disbursement this Period 3303.70 Transaction ID : D549645
City Washington	State DC	Zip Code 20013-5214	
Purpose of Disbursement Fundraising consulting fee and expenses	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3661.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fraioli & Associates		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 75214		Amount of Each Disbursement this Period 3277.14 Transaction ID : D549646
City Washington State DC Zip Code 20013-5214	Purpose of Disbursement Fundraising consulting fee and expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Fraioli & Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 75214		Amount of Each Disbursement this Period 3259.22 Transaction ID : D549647
City Washington State DC Zip Code 20013-5214	Purpose of Disbursement Fundraising consulting fee and expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HMHP Foundation		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 3900 East Market Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : D549790
City Warren State OH Zip Code 44484	Purpose of Disbursement Event sponsor Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7536.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Huntington Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 302.06 Transaction ID : D549746
City Columbus	State OH Zip Code 43216-1558	
Purpose of Disbursement Credit card processing fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Huntington Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 105.65 Transaction ID : D549747
City Columbus	State OH Zip Code 43216-1558	
Purpose of Disbursement Credit card processing fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Huntington Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 227.32 Transaction ID : D549823
City Columbus	State OH Zip Code 43216-1558	
Purpose of Disbursement Credit card processing fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	635.03
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Huntington National Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 2.50 Transaction ID : D549695
City Columbus	State OH Zip Code 43224	
Purpose of Disbursement Service fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Huntington National Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 7.00 Transaction ID : D549696
City Columbus	State OH Zip Code 43224	
Purpose of Disbursement Service fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Huntington National Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 2.50 Transaction ID : D549697
City Columbus	State OH Zip Code 43224	
Purpose of Disbursement Service fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Huntington National Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 7.00
City Columbus	State OH	
Zip Code 43224	Purpose of Disbursement Service fee	Transaction ID : D549698
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Huntington National Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 2.50
City Columbus	State OH	
Zip Code 43224	Purpose of Disbursement Service fee	Transaction ID : D549699
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jewish Journal Monthly Magazine		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 505 Gypsy Lane		Amount of Each Disbursement this Period 276.00
City Youngstown	State OH	
Zip Code 44504-1314	Purpose of Disbursement Advertisement	Transaction ID : D549716
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	285.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 2538.97 Transaction ID : D549804
City Washington	State DC Zip Code 20003-1911	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 39.70 Transaction ID : D549805
City Washington	State DC Zip Code 20003-1911	
Purpose of Disbursement Mileage reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 2538.97 Transaction ID : D549806
City Washington	State DC Zip Code 20003-1911	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5117.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 49.77 Transaction ID : D549807
City Washington State DC Zip Code 20003-1911	Purpose of Disbursement Mileage reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 2538.97 Transaction ID : D549808
City Washington State DC Zip Code 20003-1911	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 2538.97 Transaction ID : D549809
City Washington State DC Zip Code 20003-1911	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5127.71
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 91.55 Transaction ID : D549810
City Washington State DC Zip Code 20003-1911	Purpose of Disbursement Travel (tolls,gas,meals) -none over \$200	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 163.68 Transaction ID : D549811
City Washington State DC Zip Code 20003-1911	Purpose of Disbursement Travel (tolls,gas,meals) -none over \$200	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Matthew Kaplan		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 215 C St SE Apt 207		Amount of Each Disbursement this Period 2538.97 Transaction ID : D549812
City Washington State DC Zip Code 20003-1911	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2794.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matthew Kaplan			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 215 C St SE Apt 207			Amount of Each Disbursement this Period 2538.97		
City Washington	State DC	Zip Code 20003-1911	Transaction ID : D549813		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Andrew Kluge			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014		
Mailing Address 416 Lincoln St			Amount of Each Disbursement this Period 917.80		
City Ravenna	State OH	Zip Code 44266-2015	Transaction ID : D549740		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Andrew Kluge			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014		
Mailing Address 416 Lincoln St			Amount of Each Disbursement this Period 917.80		
City Ravenna	State OH	Zip Code 44266-2015	Transaction ID : D549741		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	4374.57
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Andrew Kluge		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 416 Lincoln St		Amount of Each Disbursement this Period 917.80 Transaction ID : D549742
City Ravenna	State OH	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Andrew Kluge		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 416 Lincoln St		Amount of Each Disbursement this Period 917.80 Transaction ID : D549743
City Ravenna	State OH	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Andrew Kluge		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 416 Lincoln St		Amount of Each Disbursement this Period 917.80 Transaction ID : D549863
City Ravenna	State OH	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	2753.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Andrew Kluge		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 416 Lincoln St		Amount of Each Disbursement this Period 917.79 Transaction ID : D549864
City Ravenna	State OH	
Zip Code 44266-2015	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. McMenemy's		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 325 Youngstown Warren Rd		Amount of Each Disbursement this Period 5000.00 Transaction ID : D549638
City Niles	State OH	
Zip Code 44446-4348	Purpose of Disbursement Fundraising/Catering deposit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. McMenemy's		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 325 Youngstown Warren Rd		Amount of Each Disbursement this Period 11200.00 Transaction ID : D549639
City Niles	State OH	
Zip Code 44446-4348	Purpose of Disbursement Fundraising/Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	17117.79
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. McTigue McGinnis & Colombo LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 545 East Town Street		Amount of Each Disbursement this Period 502.00 Transaction ID : D549850
City Columbus	State OH	
Zip Code 43215	Purpose of Disbursement Legal services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Muransky Companies		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 100 DeBartolo Place, #310		Amount of Each Disbursement this Period 540.00 Transaction ID : D549855
City Youngstown	State OH	
Zip Code 44512	Purpose of Disbursement Event tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 313.51 Transaction ID : D549643
City Washington	State DC	
Zip Code 20003-4071	Purpose of Disbursement Dues/Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1355.51
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 835.64 Transaction ID : D549644
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Dues/Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. New Media Campaigns		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 118-A East Main Street		Amount of Each Disbursement this Period 1656.00 Transaction ID : D549782
City Carrboro State NC Zip Code 27510	Purpose of Disbursement Website design	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1101 15th Street, NW Suite 500		Amount of Each Disbursement this Period 1950.00 Transaction ID : D549750
City Washington State DC Zip Code 20005	Purpose of Disbursement Database & Support	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4441.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Niles City Income Tax		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 34 W State Street		Amount of Each Disbursement this Period 428.09 Transaction ID : D549798
City Niles State OH Zip Code 44446	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ohio Bureau of Workers Compensation		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 30 W Spring St		Amount of Each Disbursement this Period 176.98 Transaction ID : D549816
City Columbus State OH Zip Code 43215-2216	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Ohio Department of Job & Family Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address PO Box 182404		Amount of Each Disbursement this Period 9.84 Transaction ID : D549717
City Columbus State OH Zip Code 43218-2404	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	614.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ohio Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address PO Box 530		Amount of Each Disbursement this Period 144.89 Transaction ID : D549751
City Columbus	State OH	
Zip Code 43216-0530	Purpose of Disbursement Payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ohio Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address PO Box 530		Amount of Each Disbursement this Period 144.89 Transaction ID : D549752
City Columbus	State OH	
Zip Code 43216-0530	Purpose of Disbursement Payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ohio Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 530		Amount of Each Disbursement this Period 144.89 Transaction ID : D549753
City Columbus	State OH	
Zip Code 43216-0530	Purpose of Disbursement Payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	434.67
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 123		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ohio Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address PO Box 530		Amount of Each Disbursement this Period 144.89 Transaction ID : D549754
City Columbus	State OH	
Zip Code 43216-0530	Purpose of Disbursement Payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ohio Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 530		Amount of Each Disbursement this Period 144.89 Transaction ID : D549755
City Columbus	State OH	
Zip Code 43216-0530	Purpose of Disbursement Payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ohio Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO Box 530		Amount of Each Disbursement this Period 144.89 Transaction ID : D549756
City Columbus	State OH	
Zip Code 43216-0530	Purpose of Disbursement Payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	434.67
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ohio Mutual Insurance Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1725 Hopley Ave		Amount of Each Disbursement this Period 498.00 Transaction ID : D549799
City Bucyrus	State OH	
Zip Code 44820-3596	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Stephen Pirigy		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 724 West St		Amount of Each Disbursement this Period 685.00 Transaction ID : D549700
City Niles	State OH	
Zip Code 44446-2737	Purpose of Disbursement Office rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Stephen Pirigy		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 724 West St		Amount of Each Disbursement this Period 1370.00 Transaction ID : D549701
City Niles	State OH	
Zip Code 44446-2737	Purpose of Disbursement Office rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2553.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sam's Club		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 1040 Niles-Cortland Road		Amount of Each Disbursement this Period 414.88 Transaction ID : D549667
City Warren	State OH Zip Code 44484	
Purpose of Disbursement Office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sforza & Walker Inc		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address 444 High Street NE P.O. Box 232		Amount of Each Disbursement this Period 74.72 Transaction ID : D549704
City Warren	State OH Zip Code 44482-0232	
Purpose of Disbursement Accounting services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sforza & Walker Inc		Date of Disbursement MM / DD / YYYY 09 / 12 / 2014
Mailing Address 444 High Street NE P.O. Box 232		Amount of Each Disbursement this Period 74.72 Transaction ID : D549705
City Warren	State OH Zip Code 44482-0232	
Purpose of Disbursement Accounting services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	564.32
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Harry Strawn		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1304 Niles Cortland Rd		Amount of Each Disbursement this Period 8 7 5 . 0 0 Transaction ID : D549703
City Niles State OH Zip Code 44446-3514	Purpose of Disbursement Office cleaning	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address PO Box 0901		Amount of Each Disbursement this Period 4 7 4 . 1 0 Transaction ID : D549719
City Carol Stream State IL Zip Code 60132-0901	Purpose of Disbursement Internet/Cable	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Tri-County Building & Construction Trades		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 272 West Market Street		Amount of Each Disbursement this Period 2 0 0 . 0 0 Transaction ID : D549789
City Akron State OH Zip Code 44303	Purpose of Disbursement Event sponsor	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8 4 9 . 1 0
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 123		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1442.10 Transaction ID : D549720
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1442.10 Transaction ID : D549721
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1442.11 Transaction ID : D549722
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4326.31
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 123		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1442.10 Transaction ID : D549723
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1681.83 Transaction ID : D549724
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1500 Pennsylvania Ave NW		Amount of Each Disbursement this Period 1681.83 Transaction ID : D549725
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4805.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UPS		Date of Disbursement
Mailing Address 55 Glenlake Pkwy NE		M M / D D / Y Y Y Y 07 / 09 / 2014
City Atlanta	State GA	Zip Code 30328-3474
Purpose of Disbursement Shipping	Amount of Each Disbursement this Period 69.68	
Candidate Name	Transaction ID : D549681	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. UPS		Date of Disbursement
Mailing Address 55 Glenlake Pkwy NE		M M / D D / Y Y Y Y 07 / 24 / 2014
City Atlanta	State GA	Zip Code 30328-3474
Purpose of Disbursement Shipping	Amount of Each Disbursement this Period 53.10	
Candidate Name	Transaction ID : D549682	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement
Mailing Address 55 Glenlake Pkwy NE		M M / D D / Y Y Y Y 09 / 12 / 2014
City Atlanta	State GA	Zip Code 30328-3474
Purpose of Disbursement Shipping	Amount of Each Disbursement this Period 66.12	
Candidate Name	Transaction ID : D549683	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	188.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 123		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ursuline High School		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 750 Wick Ave		Amount of Each Disbursement this Period 125.00 Transaction ID : D549659
City Youngstown	State OH	
Zip Code 44503	Purpose of Disbursement Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Winpisinger & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1792.94 Transaction ID : D549726
City Gaithersburg	State MD	
Zip Code 20878	Purpose of Disbursement Adminstrative services/Compliance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Winpisinger & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1777.26 Transaction ID : D549727
City Gaithersburg	State MD	
Zip Code 20878	Purpose of Disbursement Adminstrative services/Compliance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3695.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Winpisinger & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2014
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 2067.94 Transaction ID : D549728
City Gaithersburg	State MD Zip Code 20878	
Purpose of Disbursement Adminstrative services/Compliance	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Youngstown Columbiana Assn of Realtors		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 5405 Market Street		Amount of Each Disbursement this Period 250.00 Transaction ID : D549739
City Youngstown	State OH Zip Code 44512	
Purpose of Disbursement Event sponsor	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Michael P. Zetts		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3100 Connecticut Avenue, NW Apt. 4		Amount of Each Disbursement this Period 683.45 Transaction ID : D549852
City Washington	State DC Zip Code 20008	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3001.39
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael P. Zetts		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3100 Connecticut Avenue, NW Apt. 4		Amount of Each Disbursement this Period 683.45 Transaction ID : D549853
City Washington State DC Zip Code 20008	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 12827.24 Transaction ID : D543170
City Fort Lauderdale State FL Zip Code 33329-7812	Purpose of Disbursement Debt payment	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 11059.90 Transaction ID : D549686
City Fort Lauderdale State FL Zip Code 33329-7812	Purpose of Disbursement Credit card (see below if itemized)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	24570.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 12390.65 Transaction ID : D549688
City Fort Lauderdale	State FL	
Zip Code 33329-7812	Purpose of Disbursement Credit card (see below if itemized)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 252.60 Transaction ID : D549689 [MEMO ITEM]
City Fort Lauderdale	State FL	
Zip Code 33329-7812	Purpose of Disbursement Service fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO Box 8229		Amount of Each Disbursement this Period 1565.10 Transaction ID : D549649 [MEMO ITEM]
City Aurora	State IL	
Zip Code 60572-8229	Purpose of Disbursement Telephone expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12390.65
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chipotle		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 1922 Niles Cortland Rd SE		Amount of Each Disbursement this Period 18.15
City Warren	State OH Zip Code 44484	
Purpose of Disbursement Meal	Candidate Name	Transaction ID : D549706
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Dunkin Donuts		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 3545 Youngstown Rd SE		Amount of Each Disbursement this Period 30.97
City Warren	State OH Zip Code 44484-2830	
Purpose of Disbursement Meal	Candidate Name	Transaction ID : D549707
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Fairfield Inn Warren		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 1860 Niles Cortland Rd SE		Amount of Each Disbursement this Period 444.09
City Warren	State OH Zip Code 44484-3035	
Purpose of Disbursement Travel/Lodging	Candidate Name	Transaction ID : D549814
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 5414 Youngstown Warren Rd		Amount of Each Disbursement this Period 2.87
City Niles	State OH	
Purpose of Disbursement Printing expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Georgetown Cupcake		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 3301 M St NW		Amount of Each Disbursement this Period 45.20
City Washington	State DC	
Purpose of Disbursement Event food		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Giant Eagle		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 2061 Elm Road		Amount of Each Disbursement this Period 77.45
City Warren	State OH	
Purpose of Disbursement Food for Meeting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Giant Eagle		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 2061 Elm Road		Amount of Each Disbursement this Period 26.27
City Warren	State OH Zip Code 44481	
Purpose of Disbursement Food for Meeting	Candidate Name	Transaction ID : D549654
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Giant Eagle		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 2061 Elm Road		Amount of Each Disbursement this Period 13.47
City Warren	State OH Zip Code 44481	
Purpose of Disbursement Food for Meeting	Candidate Name	Transaction ID : D549655
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Giant Eagle		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 2061 Elm Road		Amount of Each Disbursement this Period 18.23
City Warren	State OH Zip Code 44481	
Purpose of Disbursement Food for Meeting	Candidate Name	Transaction ID : D549656
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Giant Eagle		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 2061 Elm Road		Amount of Each Disbursement this Period 5.56
City Warren	State OH Zip Code 44481	
Purpose of Disbursement Food for Meeting	Candidate Name	Transaction ID : D549657
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Havana House		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 5801 Youngstown Warren Rd # 200		Amount of Each Disbursement this Period 294.61
City Niles	State OH Zip Code 44446-4709	
Purpose of Disbursement Meal	Candidate Name	Transaction ID : D549793
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Havana House		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 5801 Youngstown Warren Rd # 200		Amount of Each Disbursement this Period 328.19
City Niles	State OH Zip Code 44446-4709	
Purpose of Disbursement Meal	Candidate Name	Transaction ID : D549794
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

A. High Pointe Restaurant

Full Name (Last, First, Middle Initial)
Mailing Address 754 Youngstown Warren Road

City State Zip Code
Niles OH 44446

Purpose of Disbursement
Meal

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 22 / 2014

Amount of Each Disbursement this Period
35.59

Transaction ID : D549748

[MEMO ITEM]

B. Holiday Inn Boardman

Full Name (Last, First, Middle Initial)
Mailing Address 7410 South Ave

City State Zip Code
Youngstown OH 44512-5781

Purpose of Disbursement
Travel/Lodging

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 22 / 2014

Amount of Each Disbursement this Period
175.34

Transaction ID : D549815

[MEMO ITEM]

c. House Gift Shop

Full Name (Last, First, Middle Initial)
Mailing Address B-218 Longworth

City State Zip Code
Washington DC 20515

Purpose of Disbursement
Gifts for supporters

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 22 / 2014

Amount of Each Disbursement this Period
290.70

Transaction ID : D549715

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ohio Turnpike		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 682 Prospect Street		Amount of Each Disbursement this Period 30.97
City Berea	State OH Zip Code 44017	
Purpose of Disbursement Tolls	Candidate Name	Transaction ID : D549758
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Ohio Turnpike		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 682 Prospect Street		Amount of Each Disbursement this Period 34.97
City Berea	State OH Zip Code 44017	
Purpose of Disbursement Tolls	Candidate Name	Transaction ID : D549759
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Ohio Turnpike		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 682 Prospect Street		Amount of Each Disbursement this Period 34.22
City Berea	State OH Zip Code 44017	
Purpose of Disbursement Tolls	Candidate Name	Transaction ID : D549760
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ohio Turnpike		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 682 Prospect Street		Amount of Each Disbursement this Period 51.76
City Berea	State OH	
Zip Code 44017	Purpose of Disbursement Tolls	Transaction ID : D549761 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Onstar		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. Box 0217		Amount of Each Disbursement this Period 29.90
City Troy	State MI	
Zip Code 48099	Purpose of Disbursement Telephone expense	Transaction ID : D549735 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Onstar		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address P.O. Box 0217		Amount of Each Disbursement this Period 29.90
City Troy	State MI	
Zip Code 48099	Purpose of Disbursement Telephone expense	Transaction ID : D549736 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Reese Floral Art		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 49 Vienna Ave.		Amount of Each Disbursement this Period 64.05
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Flowers	Transaction ID : D549826 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Renaissance Washington		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 999 9th Street, NW		Amount of Each Disbursement this Period 3615.96
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Fundraising/Catering	Transaction ID : D549862 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sheetz		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address NILES-CORTLAND ROAD		Amount of Each Disbursement this Period 27.11
City Warren	State OH	
Zip Code 44484	Purpose of Disbursement Gas	Transaction ID : D549763 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shortstacklab.com		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 201 W. Liberty Street, #LL-1		Amount of Each Disbursement this Period 30.00
City Reno State NV Zip Code 89501	Purpose of Disbursement Website expense	
Candidate Name	Category/Type	Transaction ID : D549775 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Shortstacklab.com		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 201 W. Liberty Street, #LL-1		Amount of Each Disbursement this Period 30.00
City Reno State NV Zip Code 89501	Purpose of Disbursement Website expense	
Candidate Name	Category/Type	Transaction ID : D549776 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 6004 Youngstown Rd		Amount of Each Disbursement this Period 337.05
City Niles State OH Zip Code 44446	Purpose of Disbursement Office supplies	
Candidate Name	Category/Type	Transaction ID : D549692 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 6004 Youngstown Rd		Amount of Each Disbursement this Period 320.31
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Office supplies	Transaction ID : D549693 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sunoco		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address Various Stations		Amount of Each Disbursement this Period 29.08
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Gas	Transaction ID : D549702 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Chevrolet Centre		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 229 E. Front Street		Amount of Each Disbursement this Period 976.50
City Youngstown	State OH	
Zip Code 44503	Purpose of Disbursement Fundraising event tickets	Transaction ID : D549868 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tiger Eye Promotions		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 1000 Progress St		Amount of Each Disbursement this Period 525.02
City Greenville	State OH Zip Code 45331	
Purpose of Disbursement Printing expense	Candidate Name	Transaction ID : D549718
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 182 HOWARD ST		Amount of Each Disbursement this Period 59.00
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Taxi	Candidate Name	Transaction ID : D549821
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 182 HOWARD ST		Amount of Each Disbursement this Period 18.40
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement Taxi	Candidate Name	Transaction ID : D549822
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uni Mart		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 28100 Torch Pkwy		Amount of Each Disbursement this Period 29.70
City Warrenville	State IL	
Zip Code 60555-3938	Purpose of Disbursement Gas	Transaction ID : D549773
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 2345 Crystal Dr		Amount of Each Disbursement this Period 562.10
City Arlington	State VA	
Zip Code 22227-0001	Purpose of Disbursement Travel/Airfare	Transaction ID : D549668
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 31.09
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Postage	Transaction ID : D549671
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Postmaster			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014		
Mailing Address 43 W. Park Avenue			Amount of Each Disbursement this Period 11.20		
City Niles	State OH	Zip Code 44446	Transaction ID : D549672		
Purpose of Disbursement Postage		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought:	House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. US Postmaster			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014		
Mailing Address 43 W. Park Avenue			Amount of Each Disbursement this Period 9.29		
City Niles	State OH	Zip Code 44446	Transaction ID : D549673		
Purpose of Disbursement Postage		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought:	House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. US Postmaster			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014		
Mailing Address 43 W. Park Avenue			Amount of Each Disbursement this Period 42.36		
City Niles	State OH	Zip Code 44446	Transaction ID : D549674		
Purpose of Disbursement Postage		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought:	House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 14.28
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Postage	Transaction ID : D549675
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 19.60
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Postage	Transaction ID : D549676
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 5.58
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Postage	Transaction ID : D549677
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 3966.98
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 5.60
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 3966.98
City Fort Lauderdale	State FL	
Zip Code 33329-7812	Purpose of Disbursement Credit card (see below if itemized)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	3966.98
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 297812		Amount of Each Disbursement this Period 596.97
City Fort Lauderdale	State FL	
Zip Code 33329-7812	Purpose of Disbursement Service fee	Transaction ID : D549687
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Costco		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 4725 West Ox Road		Amount of Each Disbursement this Period 263.44
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Event food/supplies	Transaction ID : D549792
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. ExxonMobil		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address Various Stations		Amount of Each Disbursement this Period 42.29
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Gas	Transaction ID : D549771
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Facebook Advertising		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1601 S. California Ave		Amount of Each Disbursement this Period 000,000.00 Transaction ID : D549784
City Palo Alto	State CA Zip Code 94304	
Purpose of Disbursement Website advertising	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 5414 Youngstown Warren Rd		Amount of Each Disbursement this Period 000,000.00 Transaction ID : D549802
City Niles	State OH Zip Code 44446	
Purpose of Disbursement Printing expense	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Georgetown Cupcake		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 3301 M St NW		Amount of Each Disbursement this Period 000,000.00 Transaction ID : D549737
City Washington	State DC Zip Code 20007	
Purpose of Disbursement Event food	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Giant Eagle		Date of Disbursement
Mailing Address 2061 Elm Road		M M / D D / Y Y Y Y 07 / 09 / 2014
City Warren	State OH	Zip Code 44481
Purpose of Disbursement Food for Meeting	Candidate Name	Amount of Each Disbursement this Period 23.69
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : D549650
		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Giant Eagle		Date of Disbursement
Mailing Address 2061 Elm Road		M M / D D / Y Y Y Y 07 / 09 / 2014
City Warren	State OH	Zip Code 44481
Purpose of Disbursement Food for Meeting	Candidate Name	Amount of Each Disbursement this Period 18.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : D549651
		[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Giant Eagle		Date of Disbursement
Mailing Address 2061 Elm Road		M M / D D / Y Y Y Y 07 / 09 / 2014
City Warren	State OH	Zip Code 44481
Purpose of Disbursement Food for Meeting	Candidate Name	Amount of Each Disbursement this Period 15.15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : D549652
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hill Country Barbecue			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 410 7th St NW			Amount of Each Disbursement this Period 851.38
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Fundraising/Catering		Category/ Type	Transaction ID : D549796 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Holiday Inn Express Warren			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 135 Highland Terrace Express			Amount of Each Disbursement this Period 183.59
City Warren	State OH	Zip Code 44484	
Purpose of Disbursement Travel/Lodging		Category/ Type	Transaction ID : D549730 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. House Gift Shop			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address B-218 Longworth			Amount of Each Disbursement this Period 166.65
City Washington	State DC	Zip Code 20515	
Purpose of Disbursement Gifts for supporters		Category/ Type	Transaction ID : D549711 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. House Gift Shop		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address B-218 Longworth		Amount of Each Disbursement this Period 35.70
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Gifts for supporters	Transaction ID : D549712
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. House Gift Shop		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address B-218 Longworth		Amount of Each Disbursement this Period 269.70
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Gifts for supporters	Transaction ID : D549713
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. House Gift Shop		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address B-218 Longworth		Amount of Each Disbursement this Period 207.00
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Gifts for supporters	Transaction ID : D549714
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. InterContinental Hotel Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 5500 Tuttle Crossing Boulevard		Amount of Each Disbursement this Period 127.70
City Dublin	State OH	
Zip Code 43016	Purpose of Disbursement Travel/Lodging	Transaction ID : D549791 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 59.23
City Washington	State DC	
Zip Code 20003-4071	Purpose of Disbursement Meal	Transaction ID : D549642 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ohio Turnpike		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 682 Prospect Street		Amount of Each Disbursement this Period 27.22
City Berea	State OH	
Zip Code 44017	Purpose of Disbursement Tolls	Transaction ID : D549757 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 123			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Onstar		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address P.O. Box 0217		Amount of Each Disbursement this Period 29.90
City Troy	State MI	
Zip Code 48099	Purpose of Disbursement Telephone expense	Transaction ID : D549734 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Reese Floral Art		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 49 Vienna Ave.		Amount of Each Disbursement this Period 200.69
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Flowers	Transaction ID : D549825 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shortstacklab.com		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 201 W. Liberty Street, #LL-1		Amount of Each Disbursement this Period 30.00
City Reno	State NV	
Zip Code 89501	Purpose of Disbursement Website expense	Transaction ID : D549774 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 6004 Youngstown Rd		Amount of Each Disbursement this Period 61.05
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Office supplies	Transaction ID : D549691 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 182 HOWARD ST		Amount of Each Disbursement this Period 11.13
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Taxi	Transaction ID : D549820 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 5.60
City Niles	State OH	
Zip Code 44446	Purpose of Disbursement Postage	Transaction ID : D549669 [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 43 W. Park Avenue		Amount of Each Disbursement this Period 19.60
City Niles State OH Zip Code 44446	Purpose of Disbursement Postage	
Candidate Name		Transaction ID : D549670 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Vernon's Cafe		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 720 Youngstown Warren Rd		Amount of Each Disbursement this Period 40.96
City Niles State OH Zip Code 44446-3551	Purpose of Disbursement Meal	
Candidate Name		Transaction ID : D549666 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name		Transaction ID : [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	125503.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 123			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Philip M. Beshara		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 8664 Kimblewick Ln NE		Amount of Each Disbursement this Period 200.00 Transaction ID : D549861
City Warren	State OH Zip Code 44484-2068	
Purpose of Disbursement Refund	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Michael S. Garvey		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 4335 S Turner Rd		Amount of Each Disbursement this Period 2600.00 Transaction ID : D549851
City Canfield	State OH Zip Code 44406-9705	
Purpose of Disbursement Refund	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Charles T. George		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 491 Millbrook St		Amount of Each Disbursement this Period 400.00 Transaction ID : D549827
City Canfield	State OH Zip Code 44406-9663	
Purpose of Disbursement Refund	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	3200.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 123	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Huntington Bank Merchant Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address PO Box 1558		Amount of Each Disbursement this Period 500.00 Transaction ID : D549835
City Columbus	State OH Zip Code 43216-1558	
Purpose of Disbursement Credit card chargeback (additional information has been requested)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mrs. Pamela E. Kanfer		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 4445 Everett Rd		Amount of Each Disbursement this Period 2600.00 Transaction ID : D549858
City Richfield	State OH Zip Code 44286-9536	
Purpose of Disbursement Refund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3100.00
TOTAL This Period (last page this line number only).....	6300.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 123	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Friends of William B. Judge		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 80 Cassell Avenue		Amount of Each Disbursement this Period 600.00 Transaction ID : D549797
City Barberton	State OH	
Zip Code 44203	Purpose of Disbursement Non-Federal Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Mahoning County Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 4011 Hillman Way		Amount of Each Disbursement this Period 150.00 Transaction ID : D549648
City Youngstown	State OH	
Zip Code 44512-1135	Purpose of Disbursement Non-Federal Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Trumbull County Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 3200 Ridge Ave SE		Amount of Each Disbursement this Period 300.00 Transaction ID : D549658
City Warren	State OH	
Zip Code 44484-3250	Purpose of Disbursement Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

TIM RYAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
American Express

Mailing Address PO Box 297812

City State Zip Code
Fort Lauderdale FL 33329-7812

Nature of Debt (Purpose):
Credit card

Outstanding Balance Beginning This Period **23887.14** **Transaction ID : D542810**

Amount Incurred This Period **0.00** Payment This Period **23887.14** Outstanding Balance at Close of This Period **0.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	